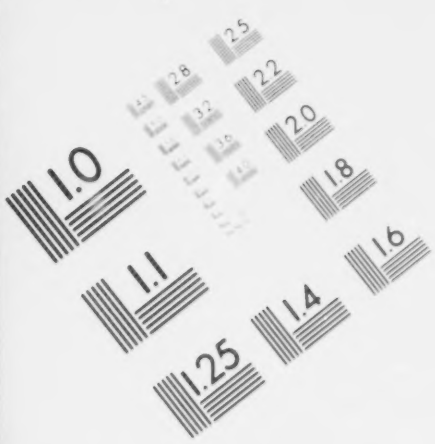

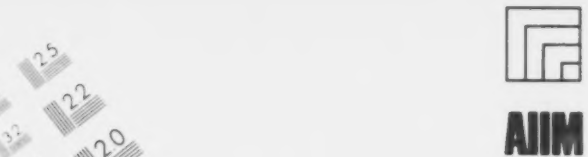

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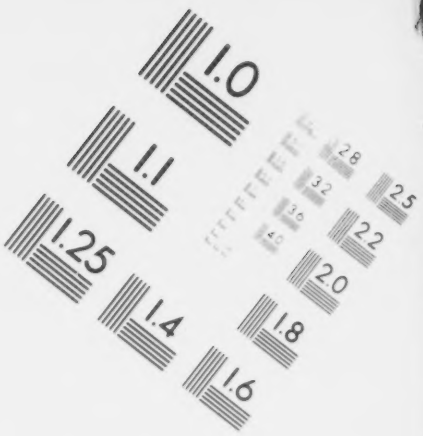

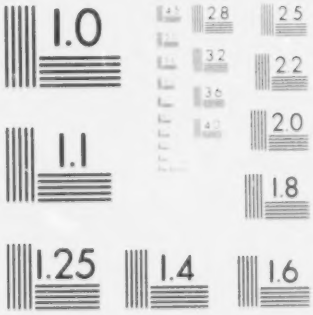

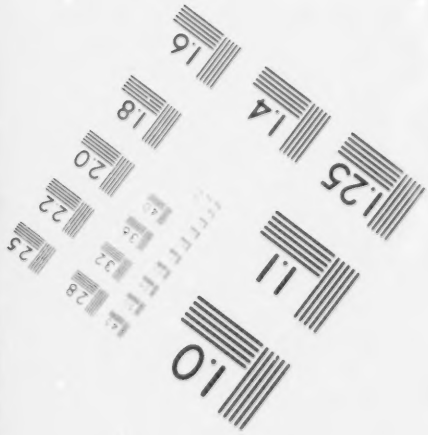

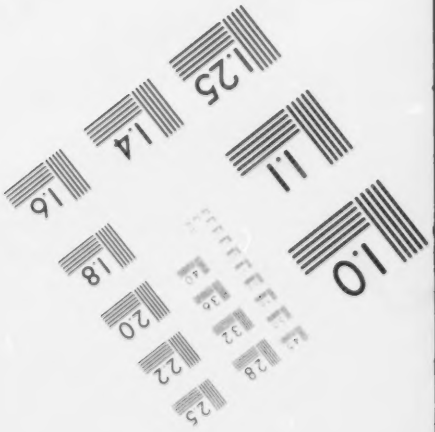

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ABSTRACT

This Kids Count report details statewide trends in the well-being of Maine's children. The statistical portrait is based on indicators of children's well-being in four areas: (1) physical and mental health; (2) community and family environment; (3) social and economic opportunity; and (4) education and learning. The report's introduction describes the Child Health Care Access initiative, the indicators addressed, and changes in the state profile from the 1997 report. The second section, and bulk of the report, presents a profile for each of the 16 counties of the state, and the county data, including a comparison to the statewide averages and changes from the 1995-96 report, for the 20 indicators of child well-being. The 20 indicators are: (1) children in families receiving Aid to Families with Dependent Children (AFDC); (2) children receiving subsidized lunches; (3) children on Medicaid; (4) unemployment; (5) births to unmarried teens; (6) prenatal care; (7) low birth-weight; (8) infant mortality; (9) number of physicians; (10) number of dentists; (11) children in foster care; (12) child deaths, ages 1-14; (13) teen deaths; (14) teen violent deaths; (15) child and teen suicide; (16) domestic assaults; (17) arrests; (18) dropout rate; (19) post-secondary education rates; and (20) children with special needs. The report's appendix lists definitions and data sources used in completing the report, and an index. (SD)

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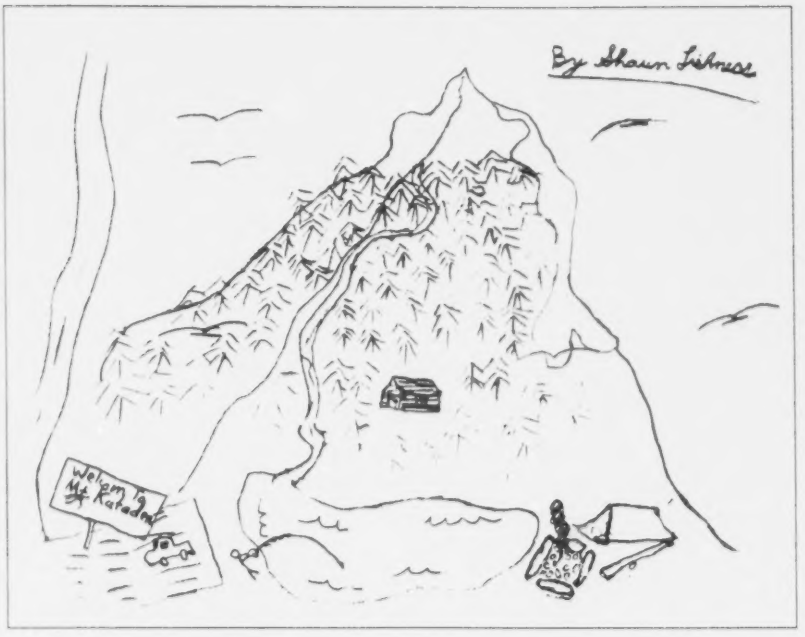

The Good Things About Maine

I think that Maine is a good state because it does not have much crime or pollution. It does not have crowded cities or tall buildings like New York City or any other big cities. When you go out and look at the mountians there are all different kinds of colors. There are bears, squirrels, mountain lions and bobcats.

Shaun Lishness
Lincoln School
Augusta

Front Cover Photo: Maine General Health
Back cover photo: Mark S. McCall

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Acknowledgments of Support

Maine KIDS COUNT is part of a broad national effort initiated by the Annie E. Casey Foundation to measure the well-being of children at the state and local levels, and to use that information to shape efforts which can improve the lives of children in Maine. The **1998 Maine KIDS COUNT Data Book** features the most up-to-date information available regarding the condition of Maine's children in terms of social and economic opportunity, community and family environment, physical and mental health, and education and learning. This Data Book focuses on child access to health care and provides a picture of the manner in which many children access health care services in Maine.

This **1998 Maine KIDS COUNT Data Book** was produced by the Maine Children's Alliance in collaboration with the Edmund S. Muskie School of Public Service. Major funding is provided by the **Annie E. Casey Foundation.** Funding aimed at improving children's access to health care is also provided through the generous support of the **Bingham Program, Jessie B. Cox Charitable Trust**, and **Maine Community Foundation**. Additional corporate support for this project was provided by **Blue Cross and Blue Shield of Maine, Fleet Bank, and WCSH 6 and Think About Me.**

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Introduction

The overall goal of the Maine KIDS COUNT project is to ensure that all of Maine's children thrive and become successful adults who are able to participate fully in Maine's social and economic environments. Having an accurate picture of the well-being of children in Maine is important for several reasons.[1] First, careful tracking of data on outcomes for children can focus the attention of policy makers and community leaders on real, rather than perceived or assumed problems. Second, data can be the solid ground upon which communities can mobilize to improve the lives of their children, youth, and families. Finally, data can be a tool for communities as they monitor the basic institutions charged with protecting our children, as well as for policy makers and advocates as they assess the impact of policies and programs for children, youth, and families.

The Project has been successful in pulling people together who are interested in the well-being of children, and in measuring how Maine is meeting the needs of its children. As we refine our data collection efforts and focus on specific issues such as child access to health care, it remains critical that indicators measure real and meaningful outcomes for children, not merely efforts made on their behalf. The Book does not prescribe specific policies or action steps to improve child well-being even though the numbers are sometimes overwhelming and the problems may seem insurmountable. The KIDS COUNT Project is dedicated to producing information that provides better insights into how policy can and does influence child well-being in Maine.

The Voices of Maine Youth

The Maine KIDS COUNT Project continues to include the voices of Maine youth in an attempt to better understand what it is really like to grow up in Maine. The project is grateful to the many students and teachers who have made contributions to this publication. Special thanks to Linda Pound and Nan Childs, art teachers from CONY High School in Augusta; to Nancy Lamarre and Carol Frace, teachers from the Lincoln School in Augusta; and to Dora Lerow from the Community School in Camden, Maine. We are grateful to these teachers for encouraging their students to participate in the Maine KIDS COUNT Project.

A. Steinberg

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How to Use This Book

To make the best decisions about how to improve the lives of Maine's children, we must first know how to read and interpret the available data. These pages provide an introduction. The data definitions and sources section at the end of the book provides more detailed information about individual indicators.

Changes in Indicators and Data Display

Like its predecessors, this fourth Maine KIDS COUNT Data Book features indicators from a variety of sources. It reiterates a number of indicators from earlier books which have not been updated. For example, the indicator for children aged 0-17 not living with a parent is only counted at the ten-year census. It provides updates to last year's indicators where they were available at press time. Responsible agencies of state government, for example, collect and disseminate data on immunizations, high school dropouts, and teen pregnancy every year.

A. Steinberg

In response to feedback from readers of last year's Maine KIDS COUNT Data Book, members of the Data Subcommittee, or our data sources, we have also made additions to some indicators or changed their definitions or formats. We added an indicator for *students reporting use of any form of cocaine within past 30 days*. We have also moved some indicators, such as *well child clinic visits by children under age 21*, to pages which provide more information on their significance to child health care access.

What is a Year?

We understand that our indicators would be easier to use if they all represented the same years, or at least defined years in the same way. Unfortunately, our data sources can't easily accommodate these needs. Our practice is to include the most recent year available for each indicator. We use multi-year averages for those indicators that tend to vary widely from one year to the next, such as poverty estimates and child deaths. The data definitions and sources section explains how a year is defined for each indicator. A calendar year runs from January 1 to December 31. A school year runs from September of one year to June of the following year and is described in terms of both years. In Maine, a state fiscal year starts on July 1 of one year and ends on June 30 of the next year and is described by the ending year, so that state fiscal year 1997 ended on June 30, 1997.

Percents and Rates

Wherever possible, we present the indicators in this Data Book as percents or rates. These enable comparison between groups of different population size. For example, in Oxford County, 49 babies were born with weights below 2500 grams in 1995, for a rate of 8.8%. In Penobscot County, which has a much higher birth rate, 81 babies were born with weights below 2500 grams in 1995, yet the rate was a much lower 5.5%.

The generic formula for calculating percents or rates is:

$$\frac{\text{(number of persons or occurrences) X (base rate, e.g. 100 or 1,000)}}{\text{population-at-risk}}$$

L. K. Gramlich

Increased rates are generally desirable for the following indicators on the thermometer page:

- Live births for which prenatal care began in the first trimester;
- Pediatricians, family practitioners, and general practitioners;
- General practice dentists; and
- High school graduates planning to attend post-secondary school.

What we mean by the population-at-risk is the population that could experience the event described in the indicator. For example, the population-at-risk for school children receiving subsidized school lunches is children enrolled in school. Percents refer to number of persons or occurrences per one hundred of the population-at-risk, and are shown with percent signs throughout this Data Book. Other rates are calculated per 1,000, 10,000, or 100,000 of the population-at-risk. For the most part, we follow commonly-used standards in our use of rates. However, at the county level, we use rate per 10,000 rather than the standard rate per 100,000 for child and teen deaths, teen violent deaths and child and teen suicides, in recognition of the relatively small populations at risk. In all cases, the indicator itself tells the base rate, while the definition in the back of the book tells the population-at-risk used to calculate the rate.

The "county thermometer" pages again include comparisons to the previous year, where data for the previous year are available and in a comparable format, as well as comparisons to statewide averages. We compare county rates to corresponding state rates using the following formula:

$$\% \text{ difference} = \frac{(\text{county rate} - \text{state rate}) \times 100}{\text{state rate}}$$

Similarly, we compare current rates to previous rates using this formula:

$$\% \text{ difference} = \frac{(\text{current rate} - \text{previous rate}) \times 100}{\text{previous rate}}$$

Increased rates are not desirable for these indicators:

- Unemployed persons aged 16 and over;
- Births to unmarried teenaged mothers who have not completed 12 years of school;
- Low birth weight infants;
- Infant mortality;
- Child deaths;
- Teen deaths;
- Teen violent deaths;
- Child and teen suicides;
- Domestic assaults reported to police;
- Arrests of children aged 10-17; and
- High school dropouts.

For the following indicators, the goal generally is to lower the rate by reducing the need for services or programs, not by reducing eligibility:

- Children aged 0-17 on AFDC;
- School children receiving subsidized school lunches;
- Children aged 0-17 participating in Medicaid;
- Children under age 18 in Department of Human Services care or custody; and
- Children with special needs as reported to the Department of Education.

Maine KIDS COUNT = Child Health Care Access

In 1997, the Maine KIDS COUNT Project was expanded to include a new Child Health Care Access Project. This expansion was made possible by the generous support of the Bingham Program, Jessie B. Cox Charitable Trusts and the Maine Community Foundation. The Child Health Care Access Project is a research and advocacy project aimed at substantially improving access to health care for all Maine children, including the approximately 11.7% who currently lack health insurance coverage. **The goals of the Child Health Care Access Project include:**

- **bringing information about child health and children's access to health care to the attention of the general public, business leaders, communties, providers and policy makers, and**
- **improving access to quality health care for children with and without health insurance**

The focus of the 1998 Maine KIDS COUNT Data on child health care access has provided us with an essential tool in documenting the manner in which many children in Maine access health care. This focus also brings attention to child health care access issues during what could be a major turning point in health care policy and in the provision of services to children.The following pages include child health care-related information and data regarding:

Emergency Room Utilization
Uninsured Children
Well Child Clinic Services
Rural Community Health Centers
Emergency Department Utilization
Family Planning Services
School-based Health Centers

The services highlighted provide a snapshot of the manner in which many children access health care services in Maine. We acknowledge, however, that some of the information presented is limited. The Child Health Care Access Project has already proven effective in bringing attention to the severe data collection limitations that exist in Maine specific to documenting the provision of health care services to our children. For example, no single data system currently measures how children, insured or uninsured, utilize the services of physicians or other medical professionals in private, primary care settings. This Project continues to work with various public and private organizations in refining health care-related data collection activities. This will assist Maine in evaluating its health care system, specifically how it is meeting the health care needs of children. Maine KIDS COUNT will also serve as a benchmark for evaluation of current health care resources and in the development of future resources designed, for example, to meet the health care needs of the uninsured. Other important initiatives of the Child Health Care Access Project aimed at improving child access to quality health care include:

Sarah Webster

Medicaid Enrollment Outreach Initiative

The Center on Budget and Policy Priorities estimates that there could be as many as 30,600 Maine children under age 11 who are income-eligible for Medicaid but not enrolled.[2] Many of these children live in families where the parent(s) work and some may be receiving coverage through other insurance plans. Many, however, are without any health insurance coverage and lack the routine preventive care they need to thrive. The Child Health Care Access Project provides information to schools, child care providers and health care providers regarding the availability of Medicaid coverage. This simple outreach effort has proven extremely effective in providing families with uninsured children with some basic eligibility information regarding the Medicaid Program. For more information regarding Medicaid eligibility criteria, and where and how to apply, please call the Maine Children's Alliance at (207) 623-1868.

Formation of the Maine Dental Access Coalition

Access to dental services in Maine for many children and adults is increasingly limited. In some areas and for certain populations, the situation seems to have reached crisis proportions. Low income children with Medicaid coverage or in families who are unable to pay for services at the time they are provided often have difficulty finding dental care. It is estimated that less than one-third of children eligible to receive preventive dental services under the Medicaid Program in Maine actually received such services in 1993.[3] Given the low number of providers who actively participated in the state's Medicaid Program in 1997, it is likely that even fewer children eligible for preventive dental services actually received them. The Maine Dental Access Coalition was created to address dental access issues specific to the needs of children and families in Maine. It consists of over 30 members representing the Department of Human Services, the Maine Dental Association, the Maine Chapter of the Academy of Pediatrics, oral health care providers, health educators, and consumers. The mission of the Coalition includes improving access to quality oral health care services throughout Maine by the development of a system that emphasizes the importance of preventive and restorative oral health care. In doing so, the Coalition will take the leadership in engaging state government, health care providers, community agencies and consumers to work together to create and maintain a system that maximizes resources, respects the needs of oral health care providers and consumers, and allows timely access to quality services that meet the unique oral health needs of each Maine citizen. Please contact the Maine Children's Alliance at (207) 623-1868 for more information regarding the Maine Dental Access Coalition.

Sarah Webster

Rural Access Research Initiative

While it might not surprise many of us that ear infections are the most common reason children present in the emergency department, it is unfortunate that more than 17,600 visits to emergency departments were made in 1994 for this reason. The Rural Access Research Initiative is a collective effort of the Maine Children's Alliance and the Northern New England Rural Pediatrics Alliance (NNERPA) to improve child access to health care throughout rural Maine. The initiative will research, analyze and disseminate children's health care related data and information related to primary health care access needs. The information will emphasize the importance of a "medical home" that provides health care that is accessible, continuous, comprehensive, family centered, and coordinated and that is provided by well-trained physicians who are able to manage or facilitate essentially all aspects of pediatric care.[4]

The Community Access to Child Health (CATCH) Program is a program of the American Academy of Pediatrics (AAP), that gives pediatricians the opportunity to share information about the use of community resources in hopes of improving the care of children across the country. NNERPA was formed by CATCH participants from New Hampshire, Vermont, and Maine to address the specific education and communication needs of rural pediatricians and to emphasize the importance of collaborating and using community resources to improve the continuity of care for children living in rural areas.[4] This initiative will utilize:

Maine Hospital Emergency Department Visits

Top Ten Ranked Emergency Room Primary Diagnosis for ages less than 19 years
Totals for Each Diagnosis Reported, by County • Calendar Year 1994

Diagnosis	Total visits for top ten diagnoses	Ear infection	Severe cold	Sore throat	Sprain/strain ankle/foot	Asthma	Other*
Totals**	48,261 (100%)	17,699 (37%)	6,912 (14%)	6,488 (13%)	2,839 (6%)	2,268 (5%)	12,055 (25%)
County							
Androscoggin	3,494	1,377(39%)	487	457	202	135	836
Aroostook	5,531	2,183(39%)	1,035	682	271	247	1,113
Cumberland	5,657	1,758(31%)	612	928	520	342	1,497
Franklin	2,036	749(38%)	254	190	105	74	664
Hancock	1,962	829(42%)	268	150	89	103	523
Kennebec	5,463	1,798(33%)	854	899	304	275	1,333
Knox	1,055	286(27%)	151	90	93	42	393
Lincoln	206	86(42%)	21	11	24	2	62
Oxford	882	203(23%)	139	117	69	37	317
Penobscot	7,731	3,231(42%)	1,013	913	424	403	1,747
Piscataquis	1,001	413(41%)	153	77	39	52	267
Sagadahoc	399	122(30%)	55	26	26	45	125
Somerset	3,792	1,037(27%)	885	602	191	131	946
Waldo	2,045	938(46%)	261	242	119	65	420
Washington	1,645	579(35%)	276	188	103	70	429
York	3,095	1,190(38%)	232	533	149	126	865
Unknown	2,267	920(40%)	216	383	111	119	518

* *Other includes:* Stomach ache, broken bone(s), cuts, scrapes or injury to scalp or neck, symptoms involving abdomen and pelvis, open wound of fingers.

**Totals include number of visits for each diagnosis and number of visits for each diagnosis as a percent of total top ten ED visits listed. Totals for ear infection visits per county are also presented as a percent of the total top ten ED visits listed for each county.

1. Maine KIDS COUNT as a mechanism for analysis, dissemination and documentation of child health care emergency room utilization data documenting primary care access need issues;

2. The Maine Children's Alliance advocacy capacity to formulate policy recommendations and to develop a primary care/medical home campaign based on objective measures of need; and

3. NNERPA's leadership capacity in working to increase pediatrician participation throughout Maine in creating a "medical home" for every child and in creating standards of care that meet the primary, preventive and educational care needs of children living in rural Maine.

As the table on the facing page shows, many of the 10 most common primary diagnoses children present in Maine hospital emergency departments represent conditions that could have been treated more appropriately and less expensively in the primary care setting. In fact, over one-third of visits made by children to the emergency department (ED) were for the primary diagnosis of otitis media, more commonly known as ear infection. While it might not surprise many of us that ear infections are the most common reason children present in the ED, it is unfortunate that more than 17,600 visits to the ED were made in 1994 for this reason. This means that too many young children were not appropriately utilizing a medical home, and found themselves in a more costly situation that could have been prevented had they been in contact with a primary care provider earlier in the development of the illness.

A closer look at this data in comparison with other child health care utilization data will help provide a picture of why children end up in the emergency department for the treatment of illnesses that perhaps may be more appropriately treated in a primary care setting. Additional data, for example, regarding demographics, primary care provider distribution, time and day of the week children present in the ED, costs of providing care in different settings, and possibly payment source, will enable pediatricians and other child advocates to define components that may be lacking or that may hinder the availability of quality care in certain communities. Data documenting the manner in which children with special needs access primary health care services will also be examined. Pediatricians will take the lead in looking at the quality of care provided to children in communities throughout Maine. They will use the data to bring health care providers together in developing a health care system that meets the primary health care needs of children living in rural Maine. They will work with other child advocates in making data-driven recommendations that insure all children receive health services that meet the accepted optimum health standards established by the American Academy of Pediatrics. Ultimately, these data-driven recommendations will result in a decreased likelihood that children will unnecessarily find themselves in the emergency department for the treatment of conditions that can be treated safely and effectively in the primary care setting.

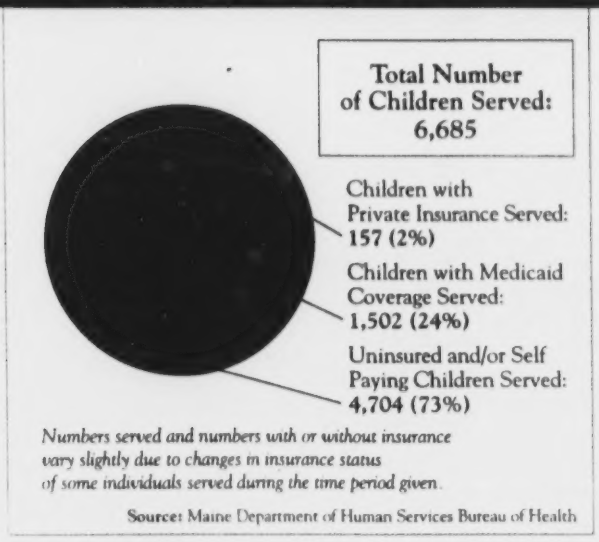
Well Child Clinic Services

Well child clinic services are one of Maine's most important "safety net" resources available to uninsured children. Well child clinic services are funded by the Bureau of Health, within the Maine Department of Human Services. The Bureau of Health's Division of Community and Family Health offers these services through the Public Health Nursing and the Women's and Children's Preventive Health Programs. Goals of these programs include assuring that all Maine women, infants and children have access to appropriate health care services that are available and accessible and that meet appropriate standards of care.[5]

Well child clinic services are provided by public and community health nurses employed by the Bureau of Health or through contract arrangements made by the Bureau with community agencies throughout Maine. These public and community health professionals assist families and communities in preventing and controlling communicable disease outbreaks by providing screenings, immunizations, general health and oral health education, and medical care to children and families throughout Maine. Some well child providers help children with special health needs maintain their highest level of functioning by acting as a liaison between the families of these children and other health care providers. Other providers assist families in obtaining services from specialty clinics, obtaining care for the sick, and providing support to families in stress.

Well child clinic services also include home visits by public health nurses to pregnant and parenting families to provide health assessment, health education,

Maine Children Receiving Well Child Clinic Services from June 1996 to July 1997


Total Number of Children Served: 6,685
Children with Private Insurance Served: 157 (2%)
Children with Medicaid Coverage Served: 1,502 (24%)
Uninsured and/or Self Paying Children Served: 4,704 (73%)

Numbers served and numbers with or without insurance vary slightly due to changes in insurance status of some individuals served during the time period given.

Source: Maine Department of Human Services Bureau of Health

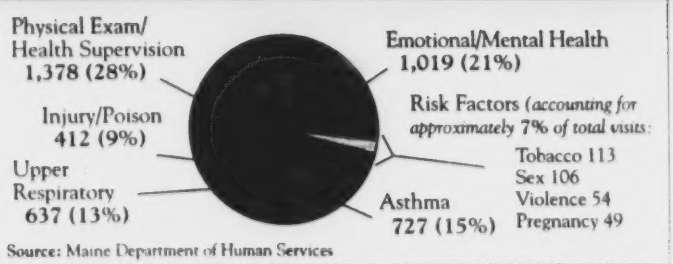
health promotion, and referral information. These visits may include health supervision of newborn babies and their postpartum moms, interventions for women and children at risk, case management and care coordination. Public health nurses also provide parenting education to some families in an attempt to prevent child abuse and neglect. Well child clinics provide preventive health services including immunizations to preschool children and school-based health services to other children in small rural schools. With almost 75% of its client base receiving services on a sliding fee schedule or without paying at all, it is fair to say that well child clinic services are one of Maine's most important "safety net" resources. Most of the families who access these services are uninsured and lack the resources they need to ensure continuity of their children's primary and preventive health care needs. For more information regarding well child clinic services available in your area, contact the Maine Bureau of Health at (207)287-3311.

Maine School Based Health Centers

The school setting is a vital site for delivering a wide range of physical and behavioral health services: education and health working together to create healthier students and better learners.[6] School based health centers have emerged in recent years as a promising approach for responding to the multiple health and service delivery needs of children and adolescents.[7] There are 10 School-Based Health Centers (SBHCs) currently available to students throughout Maine. These Centers provided a variety of services to over 1,755 children and adolescents during the 1997 school year. SBHCs receive support through the Department of Human Services, Division of Community and Family Health. Services provided by SBHCs may include diagnosis and treatment of acute conditions and management of chronic illnesses. Centers have basic laboratory capabilities for diagnosis, such as strep throat cultures. The Centers' medical staff can provide prescriptions or medication on site. Some SBHCs provide emotional and mental health services as well as health supervision or preventive health care services such as sports physicals or smoking cessation programs.[8] Some SBHC staff provide substance abuse services and in some cases are the first to respond to emergency situations involving students and drugs or alcohol. The Centers often serve as a referral resource for community services available to students. Centers require parental permission in order to see and treat students. Center staff work closely with school staff, families, and community providers in meeting the health care needs of those seeking services.

The Department of Human Services is in the process of designing outcome measures and indicators that reflect the effectiveness of school based health centers in meeting the health care needs of children served. Currently, Centers track the number of children served and visits provided during the school year, diagnosis information, services provided, risk factor information and information regarding health insurance status.

Statewide School Based Health Center Visits: Diagnoses



Source: Maine Department of Human Services

School Based Health Center Summary Data, 1997 School Year

Number of SBHCs: **10**
Total Students Enrolled: **3,341**
Total Students Served: **1,755**
% of Enrolled Served: **52%**
Total Number of Visits: **4,820**
% Served Without Insurance: **11%***

Source: Maine Department of Human Services Bureau of Health

Family Planning Services

Family Planning Services have proven crucial in reducing teen pregnancy in Maine over the last decade. Over 10,244 women and young people age 19 and under received health care services from Family planning providers from July, 1996 to June, 1997. Many others received health education services though schools and/or resources available in local communities. Family planning provides a wide variety of health care services to our youth including annual physical exams, screening services for sexually transmitted diseases, pregnancy testing, contraception education, referral services for the treatment of sexual and physical abuse, and HIV counseling and testing services. These services have proven crucial in reducing teen pregnancy in Maine over the last decade and in providing important information to teens in preventing the spread of sexually transmitted diseases.

Over three quarters of the young people who received family planning services last year came from low income families, many of which are without health insurance coverage. Without family planning services, many young people in Maine would go without the preventive health care services they need to grow into healthy adults. Over 33 family planning clinics in Maine provide medically necessary services as well as training and education opportunities to health care professionals, teachers and parents throughout the state. For more information regarding the family planning providers available in your community and the services they offer, contact the Family Planning Association of Maine in Augusta at (207)622-7524.

Family Planning Services Provided to Maine Youth from 7/1/96 to 6/30/97

Number of youth receiving direct services from family planning, by age and gender as a percent of all youth receiving direct services and as a percent of all Maine youth ages 10-18 (based on 1995 Census Bureau population estimates):

<15 years	572 (5%)
15 - 17years	4,871 (48%)
18 - 19	4,801 (47%)
< = 19 years	10,244 (100%)

Female: 10,068 (98%) Male: 176 (2%)
Percentage of Maine Youth Served: 6%*

* *Indicates only those youth who received direct services, such as pregnancy testing, STD screenings, counseling services. Does not include youth participating in health education programs offered by Family Planning in school or community settings.*

Maine's Rural Community Health Centers

Community heath centers are critical resources to Maine's families. Over one-third of their patients are uninsured and in most instances they are the only provider of primary health care services in the rural communities they serve. Maine's 29 Community and Indian Health Centers (CHCs) and programs serving homeless and migrant populations provide health services to approximately 30,000 children, adolescents and young adults under the age of nineteen. These centers have governing boards including users of the center and a mission to provide culturally sensitive, family-centered primary health care services regardless of one's ability to pay. All accept Medicaid and Medicare assignment, and have sliding fee scales for individuals under 200% of poverty. Half of those who utilize services at CHCs have incomes below 200% of poverty and 37% lack any form of health insurance coverage. Centers are the "medical home" of their patients, and since there are no public health departments in rural Maine, CHCs are the major and often the only accessible source of preventive health care and social services for families in the communities they serve. Staffed by physicians, physician assistants and nurse practitioners, health centers have a history of establishing interdisciplinary and multi-organizational approaches to health care. They provide a broad range of primary care services, including immunizations, well child care, acute care, preventive health services and family planning. Several provide mental health, substance abuse, and dental services.

In addition to caring for their patients, community health centers also care for the health of their community. For instance, several centers have lead poisoning prevention and pediatric head injury prevention programs, community health fairs and school-linked or school-based health programs. The Maine Ambulatory Care Coalition provides more information about health centers and their services at (207) 621-0677.

NOTE: School Based Health Center Summary Data *(left)*:

*This figure is probably underreported as some SBHCs do not report on the health insurance status of students served. At least 11% of students served were reported to be without health insurance coverage; the percent of all students served who were without health insurance is probably higher. The 11% is based on the actual number of students served who were reported to be without health insurance (198) divided by the total number of students served.

Physical and Mental Health

	Number	Rate or Percent	US Rate or Percent
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full-time equivalent rate per 1,000 children aged 0-19, 1995	592.7	1.76	—
General practice dentists; full-time equivalent rate per 1,000 children aged 0-19, 1994	291.7	0.9	—
Core mental health professionals; rate per 1,000 children aged 0-19, 1994	1,382	4.0	—
Children without health insurance, five-year average, 1992-1996	—	11.7%	13.3%
▲ Children aged 0 -17 participating in Medicaid, 1997	76,939	25.2%	—
Medicaid Early Periodic Screening, Diagnostic, and Treatment Services, eligible children under age 21 receiving at least one initial or periodic screening service, as a percent of those who should, 1996	37,206	63%	—
High school students who visited a health professional during the past 12 months, 1995	—	81.0%	—
Low birth-weight infants; live births under 2500 grams (5.5 pounds) as a percent of all live births, 1995	841	6.1%	7.3%
Live births for which prenatal care began in the first trimester, 1995	12,293	88.6%	81.0%
Two year-olds who were age-appropriately immunized, 1996	—	89.0%	74.0%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995	95.0	6.2	7.5
Child deaths; rate per 100,000 children aged 1-14, five-year average, 1991-1995	52.0	21.6	29.0
Teen deaths; rate per 100,000 children aged 15-19, five-year average, 1991-1995	55.6	64.6	87.4
Teen violent deaths; rate per 100,000 children aged 15-19, five-year average, 1991-1995	45.2	52.5	69.0
Child and teen suicides; rate per 100,000 children aged 10-19, five-year average, 1991-1995	12.2	7.0	6.0
High school students reporting at least one suicide attempt in the last year, 1997	—	9.0%	—
Children aged 19 and under in motor vehicle crashes with personal injury, as a percent of all children in motor vehicle crashes, 1996	4,419	14.6%	—
Hospital discharges of children under 18 for mental health diagnoses, rate per 1,000 children under 18, 1996	1,381	4.5	—
Sexually active high school students who reported using a condom during last intercourse, 1997	—	51.0%	—
▲ Gonorrhea cases, 10-19 year-olds, rate per 100,000 10-19 year-olds, 1996	15	8.5	—
▲ Chlamydia cases, 10-19 year-olds, rate per 100,000 10-19 year-olds, 1996	357	202.8	—

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

● New Indicator

Physical and Mental Health

High school students reporting:	Male	Female	Total	Number	Rate or Percent	US Rate or Percent
▲ alcohol use within past 30 days	53%	50%	51%			
▲ marijuana within past 30 days	33%	27%	30%			
▲ cigarette smoking within past 30 days	38%	41%	39%			
● use of any form of cocaine within past 30 days	4%	3%	3%			
▲ use of inhalants at any time during their life	20%	18%	19%			
Children aged 0-14 using services of licensed alcohol and drug abuse treatment providers, rate per 1,000 children aged 0-14, 1996				76	0.3	
Youth aged 15-19 using services of licensed alcohol and drug abuse treatment providers, rate per 1,000 youth aged 15-19, 1996				743	8.7	

"When I look at his picture when he was two weeks old, with his daddy's hand almost the size of his entire body touching him softly, and the 6-inch Elmo doll by his side, I am reminded that if I did not have health insurance and good prenatal care, neither he nor I might be here today. For me, this picture captures the essence of what good health care is all about."

-Lori Freid Davis

Lori Freid Davis

Physical and Mental Health

Maine has one of the highest immunization rate of children in the nation.

Preventive health care is key to healthy outcomes; and for that reason, we must continue to strive to increase the availability of, and children's access to, quality preventive health services. The good news is that Maine's immunization rate for two-year olds who were age-appropriately immunized continues to increase from 84% in 1995 to 89% in 1996. Maine leads the nation in immunization of children, ranking well above the national average of about 75%.

During the period from 1992–1996, an average of 11.7% of Maine children lacked any form of health insurance.

We fall far short of celebration, however, in other areas related to the preventive health care needs of our children. An average of 11.7% of children in Maine lacked health insurance each year from 1992 to 1996. The uninsured tend to be sicker than those with insurance coverage, but they see a physician less often and will often delay or forego needed medical care.[9] Typically, they do not seek preventive screenings or prompt medical treatment, and will often wait to seek care until the problem has become unbearable

and more difficult to treat. While many other barriers to health care exist, without insurance, many simply go without care.

The number of Maine children who received preventive health screenings, or diagnostic and treatment services under the state's Medicaid program as a percent of those who should have received such services appears to have decreased from 73.4% in 1995 to about 64% in 1996.

This means that fewer children with Medicaid coverage received the preventive health care services they were eligible to receive and need to grow up healthy. The state Medicajd agency is working to improve the outreach efforts that affect the manner in which children access preventive health services under the Medicaid program. It is also working on improving the manner in which it documents how children participating in the Medicaid program access preventive health care services in Maine. This indicator will prove to be increasingly important as the Medicaid program restructures its preventive care outreach initiatives and as it moves from a fee-for-service payment system into managed care.

The percent of low birth-weight infants born in Maine increased from 5.7% in 1994 to 6.1% in 1995. Most babies born in Maine get off to a healthy start from birth. Low birth weight babies (live births of babies weighing less than 5.5 pounds), however, have a higher probability of experiencing developmental problems and are likely to have problems as they move through the different growth stages.[10] Although Maine ranks relatively well when compared nationally to the numbers of low birth-weight babies, the increase from 1994 to 1995 deserves our attention and should give us reason for concern.

The percent of children who reported smoking cigarettes or who had their drivers license suspended due to alcohol-related incidents increased.

New data from the Department of Education indicates that 38% of high school males and 41% of females reported smoking cigarettes in a given month in 1996. This is particularly troubling in light of research released in 1996 by the Centers for Disease Control and Prevention that indicates that Maine has the nation's highest rate of young adult smokers.[11] We need to develop preventive measures and interventions that support and reward health-promoting behavior by our youth. Such preventive measures might also affect the rate of alcohol-related license suspensions for drivers under age 21, which increased from 10.4 per 1,000 teens in 1995 to 11 per 1,000 in 1996. While these rates may seem insignificant, there are likely to be more youth who drive under the influence of alcohol without being detected. This creates the potential for sudden tragedy for a significant number of teens in Maine who could be involved in fatal automobile accidents. Teens who don't smoke and who don't drink and drive should be recognized for being responsible young adults. We must take advantage of prevention opportunities currently available to the state and strive to create in communities throughout Maine resources that are proven to reduce smoking and drinking among teens.

Community and Family Life

2,823 appropriate referrals/requests for child abuse and neglect services in 1996 were not assigned due to the lack of resources.

Children need a safe and nurturing environment for healthy development. Young people who grow up in environments where problems outweigh opportunities are far more likely to experience negative outcomes that are tragic for themselves and for society as a whole.[12] Unfortunately, too many children in Maine experienced abuse or neglect, or were arrested in 1996.

While the actual number of requests for child abuse and neglect services decreased in 1996, the number of substantiated child abuse and neglect victims in Maine (children aged 0-17 who experienced some kind of sexual, physical, emotional abuse or neglect) slightly increased from 4628 in 1995 to 4,656 in 1996. The tragedy of abuse many Maine children experience was compounded by the fact that 2,823 appropriate referrals/request for child abuse and neglect services in 1996 were not assigned due to the lack of resources.

The rate of arrest of Maine children aged 10-17 increased from 82.3 per 1,000 children in 1995 to 90.3 in 1996.

This represents over a 9% increase from 1995 to 1996. The rate of boys arrested increased to 68.4 per 1000. The rate for girls increased, to 22 per 1000. These increases serve as a "wake-up call" and should give us reason for concern. Schools and local communities need assistance in developing resources that provide our teens with opportunities for developing and creating positive relationships and experiences as they grow.

Community and Family Environment

		Number	Rate or Percent	US Rate or Percent
Substantiated child abuse and neglect victims: rate per 1,000 children aged 0-17, 1996		4,656	15.3	15.0

Victims by gender and type of abuse			Victims by age	
	Male	Female	Total	4,656
Total	2,373	2,283	0-4	1,392
Sexual Abuse	97	280	5-8	1,273
Physical Abuse	410	302	9-12	1,110
Neglect	854	775	13-15	635
Emotional Abuse	1,012	926	16-17	246

Requests for child abuse and neglect services, 1996	16,132
Cases screened out	8,834
Cases appropriate for Child Protective Services	7,298
Appropriate referrals assigned for services	4,475
Appropriate referrals not assigned due to lack of resources	2,823
New cases assessed	3,978
Completed assessments substantiated	2,194
Completed assessments unsubstantiated	1,784

Children living in overcrowded housing, 1990			5.9%	16.1%
Children under age 6 with both or only parent in the labor force, 1990		60,890	58.3%	54.9%
Children under age 18 with both or only parent in the labor force, 1990		201,058	65.0%	61.1%
Children aged 0-17 not living with a parent, 1990		11,148	3.6%	4.3%
Children in single-parent families, three-year average, 1993 - 1995[1]		—	25.0%	26.0%
Children aged 0-17 in Department of Human Services care or custody; rate per 1,000 children aged 0-17, July 1996		2,294	7.5	—
Children aged 0-17 living in homeless or emergency shelters, rate per 1,000 children aged 0-17, March 1997		245	0.8	—
Children aged 5- 17 who do not speak English at home, 1990		9,886	4.4%	13.9%
Arrests of children aged 10-17; rate per 1,000 children aged 10-17, 1996	Total	12,965	90.4	
	Male	9,822	75.8	
	Female	3,143	24.2	
Arrests for crimes against persons of children aged 10-17; rate per 1,000 children aged 10-17, 1996	Total	237	1.7	5.2
	Male	200	84.4	
	Female	37	15.6	
Alcohol-related license suspensions for drivers under age 21; rate per 1,000 licensed drivers under age 21, 1996		642	11.0	
OUI arrests for drivers under age 21, rate per 1,000 licensed drivers under age 21, 1996 rate per 1,000 licensed drivers under age 21, 1996		848	15.0	
Domestic assaults reported to police, rate per 100,000 population, 1996		3,914	315.3	

Social and Economic Opportunity

> *"...**Lots of people** don't have a clear picture of what they want out of life and awhile ago...I wasn't quite sure myself. But I know exactly what I want now: a better place to raise my family, a job, to graduate from college, and to do what I can to make my life and family happier..."*
>
> **Tammy**
> *The Community School, Camden*

Too many children in Maine continue to live in poverty. The nearly 17% of children who lived at or below the federal poverty line during the period 1992 through 1996 shows us that poverty remains one of the most critical indicators affecting Maine's children. Clearly, this indicates the need for new and continued resources that address the social and economic problems many of these children face daily.

As the percentage of children living in poverty remains somewhat consistent, other indicators show us that a significant number of Maine children also live in families with incomes that hover just above the poverty line. For example, 38% of children under age 5 received WIC benefits in 1996 and 31.1% of school aged children participated in the state's subsidized school lunch program. These supplementary food programs have proven critical in meeting the nutritional needs of many growing children in Maine. Approximately 26% of Maine children age 0-17 were enrolled in the Medicaid Program in 1997, and as previously mentioned, it is estimated that up to 30,600 Maine children under age 11 may be income-eligible for Medicaid coverage but not enrolled. Many of these children live in families where the parent(s) work hard at low-wage jobs that do not necessarily provide what is needed to put food on the table or get kids to the doctor. Unfortunately the percent of jobs that pay a liveable wage continues to decrease in Maine, from 81% in 1993 to 79.1% in 1994. While it is obvious to most of us that we should remain sensitive to the needs of children living in poverty, we must also recognize that a number of children in Maine live in families where earnings come from low-wage jobs that do not necessarily provide the resources necessary to meet the daily, basic needs of these families. We need to ensure that these families have access to the resources they need to not only continue to rise above poverty, but also to meet the basic needs of their growing children.

Olive Pierce

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

Social and Economic Opportunity

		Number	Rate or Percent	US Rate or Percent
Unemployed persons aged 16 and over, annual average, 1996		34,100	5.1%	5.4%
Unemployed persons aged 16 - 19, annual average, 1994		7,000	18.3%	17.6%
Jobs that pay a liveable wage, 1994		388,575	79.7%	—
Children aged 0-17 living at or below federal poverty line, five-year average, 1992-1996		—	15.8%	21%
Median household income, 1996		$33,883	—	$35,492
Median income of families with children, 1994		$34,200	—	$37,000
▲ Children aged 0 - 17 on AFDC in August, 1997		28,667	9.4%	—
Children aged 0-17 on AFDC, mean number in calendar year 1996		33,696	11.0%	—
▲ Adolescent female heads of household as a percent of all female heads of household on AFDC in June, 1997		73	0.4%	—
▲ AFDC cases open more than 12 months as of June, 1997		9,175	53.0%	—
Children aged 0-17 receiving Food Stamp benefits in August, 1997		42,452	13.9%	—
State AFDC and Food Stamp benefits as a percent of poverty line in 1996			66.5%	—
Recipients of WIC Benefits, 1996	Total	44,119		
	Women	14,182		
	Infants and Children	29,937	40.2%	
School children receiving subsidized school lunches, 1996-1997 school year	Total	65,774	31.1%	—
	Free	51,304	24.3%	—
	Reduced Price	14,470	6.9%	—
Child day care, August, 1997	Licensed/registered slots	40,890		
	Subsidized slots as a percent of total	3,919	9.6%	
Families headed by mothers receiving child support or alimony, five-year average, 1992 - 1996		—	44.0%	33.0%
Child support enforcement, cases with collection, 1994		23,850	32.7%	18.2%
Births to single teenaged mothers as a percent of total live births, 1995		1,150	8.3%	—
Births to married teenaged mothers as a percent of total live births, 1995		274	2.0%	—
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		750.6	8.9	—
Repeat teen pregnancies as a percent of total teen pregnancies, 1995		477	22.7%	—
Women in labor force with youngest child under age 6, 1990		42,260	58.0%	54.5%
Women in labor force with youngest child aged 6 - 17, 1990		64,485	74.4%	70.9%

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

Education

Maine continues to take delight in experiencing one of the lowest high school dropout rates in the nation.

The percent of high school students who dropped out of school continued to decrease slightly from 3% to 2.9% during the 1995-1996 school year. While Maine takes considerable pride in having the second lowest high school dropout rate in the nation,[13] there are other reasons to celebrate. Maine's 4th graders rank among the best in the nation in the percent of students who score above basic reading and mathematics levels.[14] The percent of Maine high school graduates planning to attend post-secondary school increased to 62.5% during the 1995-96 school year from 59.6% the previous year. We must provide each of these graduates with the resources and opportunities they need to continue their education, particularly as educational credentials become more important in determining future employment status.[15]

A. Steinberg

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Education and Learning

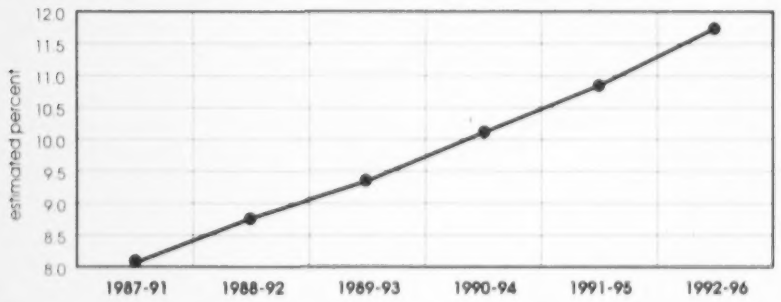
		Number	Rate or Percent	US Rate or Percent
Head Start Program, 1997	Current Capacity	3,108		
	Eligible Children	9,405		
	Unmet Need	6,297	66.9%	
Public school enrollment, October 1996	Total	209,339	100.0%	
	Grades K-8	152,067	72.6%	
	Grades 9-12	57,272	27.4%	
Private school enrollment, October 1996	Total	13,405	100.0%	
	Grades K-8	5,928	44.2%	
	Grades 9-12	7,477	55.8%	
Home-schooled students, 1996 annual average	Total	3,392	100.0%	
	Grades K-8	2,726	80.4%	
	Grades 9-12	666	19.6%	
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		313,055	144.9	—
Children with limited English proficiency attending school, 1995-1996 school year, rate per 1,000 students enrolled in public and private schools.		2,505	12.5	—
High school completions, as a percent of all 17 year-olds, 1995 - 1996.	Total	13,470	78.1%	—
	Diploma	12,853		
	Adult Education	237		
	GED	380		
High school dropouts, 1995-1996 school year		2,023	2.9%	—
Teens aged 16-19 not in school and not in the labor force, three-year average, 1993 - 1995		—	5.0%	9.0%
Teens aged 16-19 not in school and not high school graduates, three year average, 1993 - 1995		—	4.0%	9.0%
High school graduates planning to attend post-secondary school, 1995-1996 school year		9,083	62.5%	72.0%
Adults 18 and over who have completed high school or equivalency, 1990		725,423	79.0%	—

Graduation Hopes and Fears

"It's only a very short time 'till 'the big day' and I'm getting scared. Am I still gonna have a job? Am I living down here? Am I gonna go to college? What's going on? I've changed. I'm really confused."

Fran
The Community School, Camden

Maine Children Without Health Insurance

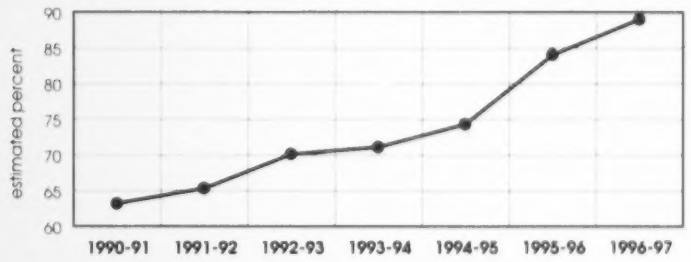


5-Year Average	
1987-91	8.06
1988-92	8.76
1989-93	9.34
1990-94	10.10
1991-95	10.84
1992-96	11.74

Source: *U.S. Department of Commerce, Bureau of Census, Current Population Survey*

Children without health insurance are less likely to receive needed preventive health care. The Census Bureau asks questions about health insurance coverage of family members in its annual Current Population Survey. We use five-year averages to adjust for fluctuations due to the relatively small number of Maine households participating in the survey. It appears that the percent of Maine children lacking either public or private health insurance continues to increase.

Maine Two Year-Olds Who Were Age-Appropriately Immunized

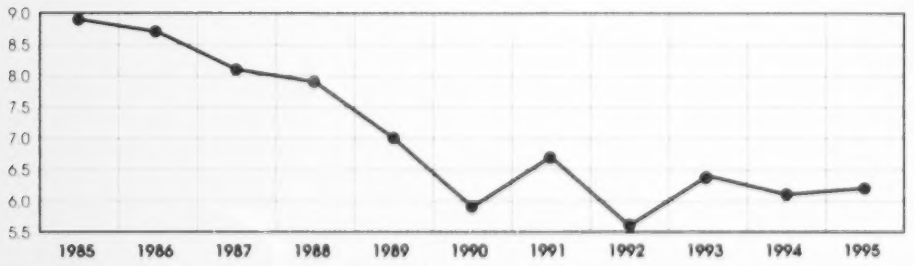


Percent of Two Year-Olds	
1990-91	63.2
1991-92	65.3
1992-93	70.1
1993-94	71.1
1994-95	74.3
1995-96	84.0
1996-97	89.0

Source: *Maine Department of Human Services, Immunization Program*

Immunization protects children from diseases such as measles, mumps, rubella and polio. State-wide estimates are based on retrospective surveys of children entering school. Age-appropriate immunizations include 4 diphtheria/pertussis/tetanus, 3 polio, and 1 measles/mumps/rubella vaccine, administered in a series of well-child visits to a health professional. The immunization rate in Maine is steadily increasing.

Maine Infant Mortality



Deaths/1,000 live births			
1985	8.9	1991	6.7
1986	8.7	1992	5.6
1987	8.1	1993	6.4
1988	7.9	1994	6.1
1989	7.0	1995	6.2
1990	5.9		

Source: *Maine Department of Human Services, Office of Data, Research, and Vital Statistics*

Infant mortality rates are a widely-used indicator of the health and well-being of a population. Maine enjoys one of the lowest infant mortality rates in the United States.

Maine Child and Teen Suicide Rate

Suicides/100,000 10-19 year-olds	
1987	6.1
1988	10.7
1989	8.0
1990	7.5
1991	8.6
1992	8.7
1993	7.5
1994	5.8
1995	4.5

Source: Maine Department of Human Services, Office of Data, Research, and Vital Statistics

Suicide is the ultimate form of self-destructive behavior. Child and teen suicide is a matter of great concern in Maine and in the United States. The child and teen suicide rate in Maine showed a continued decline in 1995.

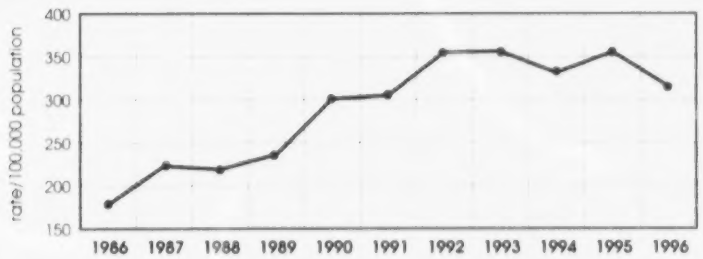
Maine Teen Pregnancy

Pregnancies/100,000 10-17 year-old females	
1987	14.5
1988	15.8
1989	15.0
1990	14.6
1991	13.8
1992	11.5
1993	11.6
1994	10.6
1995	11.8

Source: Maine Department of Human Services, Office of Data, Research, and Vital Statistics

Teen pregnancy places both the young mother and her child at risk for a variety of medical, social, and economic problems. Rates are shown for 10 through 17 year-olds, for whom the risk of problems is greatest. After declining for a number of years, the rate of pregnancy for this age group rose slightly in 1995.

Reported Domestic Assaults in Maine

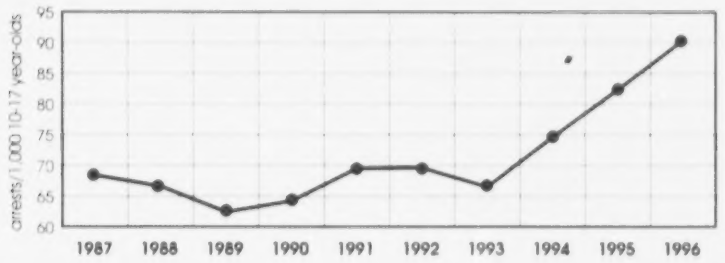


Assaults/100,000 population	
1986	178
1987	223
1988	219
1989	236
1990	301
1991	305
1992	355
1993	356
1994	331
1995	355
1996	315

Source: Maine Department of Public Safety, Uniform Crime Reporting Division

While most of the victims of domestic violence are women, children may be the victim or the perpetrator of a domestic assault. They are also witnesses to violence and its effects. The rate of reported domestic assaults declined slightly from 1995 to 1996.

Arrests of Maine Children Aged 10-17

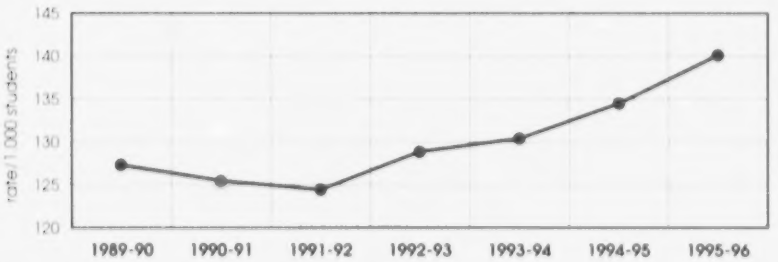


Arrests/1,000 10-17 year-olds	
1987	68.4
1988	66.6
1989	62.4
1990	64.2
1991	69.5
1992	69.6
1993	66.5
1994	74.6
1995	82.3
1996	90.4

Source: *Maine Department of Public Safety, Uniform Crime Reporting Division*

Children and adolescents who are arrested have often committed previous minor infractions noted by their parents, teachers, or neighbors. Arrests are made for causes ranging from homicide and robbery to vandalism and operating under the influence. The overall rate of arrests for Maine children and adolescents continues to increase.

Maine School Children with Special Needs

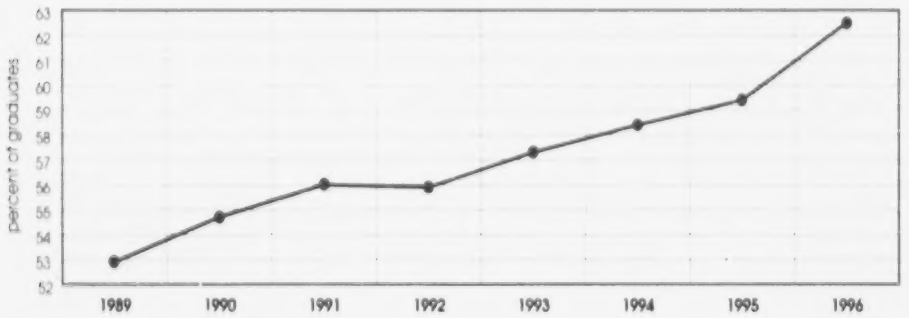


Rate /1,000 students	
1989-90	127.3
1990-91	125.5
1991-92	124.4
1992-93	128.9
1993-94	130.4
1994-95	134.5
1995-96	140.1

Source: *Maine Department of Education, Division of Special Services*

Children with a variety of disabilities, including learning disabilities, behavior impairments, speech and language impairments and developmental disabilities, receive supplemental services from their schools. The percent of all children enrolled in school who receive such services has been increasing over the last four school years.

Maine High School Graduates Planning to Attend Post-Secondary Education



Percent of Graduates	
1989	52.9
1990	54.7
1991	56.0
1992	55.9
1993	57.3
1994	58.4
1995	59.4
1996	62.5

Source: *Maine Department of Education, Division of Management Information*

Educational attainment reflects self-esteem and motivation and is a positive indicator of success in later life. An increasing proportion of Maine high school graduates plan to attend post-secondary education, whether college or technical school.

Steve Demetriou
Beverly A. Ludden
Katie Murphy
B. Audet
Carol Richards
Cynthia Huff
Cathy Dowling

MAINE STATE PROFILE

What Maine is all About

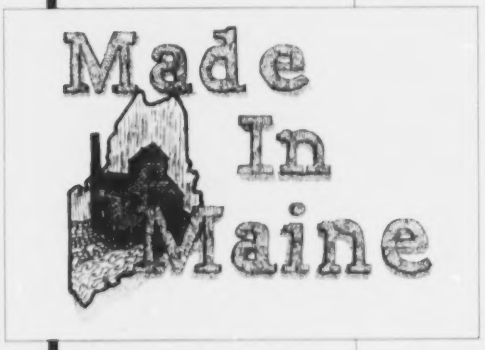
Maine is a great place to visit. Maine is 70 degrees west and 45 degrees north. Our Maine lobsters are good. Maine has forests that have surprises in the fall. Pumpkins, apples, strawberries etc. are great to eat... Sightseeing, hiking and hunting are great things to do here. In winter people come over to ski, skate, snowboard etc. Spring is when you can get honey. Summer you can go to our cold water beaches and make sand castles and play volleyball.

- Shane Preo
Lincoln School, Augusta

General Information

		Number	Percent
Total Population, 1995 estimated		1,241,38	100.0%
Under 5 years		74,513	6.0%
5 to 9 years		86,918	7.0%
10 to 14 years		90,552	7.3%
15 years		18,033	1.5%
16 years		17,629	1.4%
17 years		17,250	1.4%
18 years		16,312	1.3%
19 years		16,286	1.3%
Total Population, aged 15 - 19		85,510	6.9%
Total Population, aged 0-19		337,493	27.2%
20 to 64 years		731,744	58.9%
65 years and over		172,145	13.9%
Children aged 0-19 who are: (1994 estimated)	White	331,309	98.0%
	Asian and Pacific Islander	2,911	0.9%
	American Indian	2,183	0.6%
	African American	1,738	0.5%
Public school enrollment, 1996	Total	209,339	100.0%
	Grades K-8	152,067	72.6%
	Grades 9-12	57,272	27.4%
Private school enrollment, 1996	Total	13,405	100.0%
	Grades K-8	5,928	44.2%
	Grades 9-12	7,477	55.8%
Home-schooled students, 1996 annual average	Total	3,392	100.0%
	Grades K-8	2,726	80.4%
	Grades 9-12	666	19.6%
Adults 18 and over who have completed high school or equivalency, 1990		725,423	79.0%
Children at or below federal poverty line, 1990		58,185	18.8%
Children aged 0-17 living at or below federal poverty line, five-year average, 1992-1996			15.8%
Median household income, 1993 estimated		$28,731	—
Median household income, 1996 estimated		$33,883	—
Women in labor force with youngest child under age 6, 1990		42,260	58.0%
Women in labor force with youngest child under aged 6 - 17, 1990		64,485	74.4%

Thanks to the staff of the Maine State Museum and to Cony High School students and art teachers for sharing Maine's history and art work.



Drawing of the entrance panel to the Maine In Maine Exhibit Maine State Museum, Augusta
designed by Donald Bassett

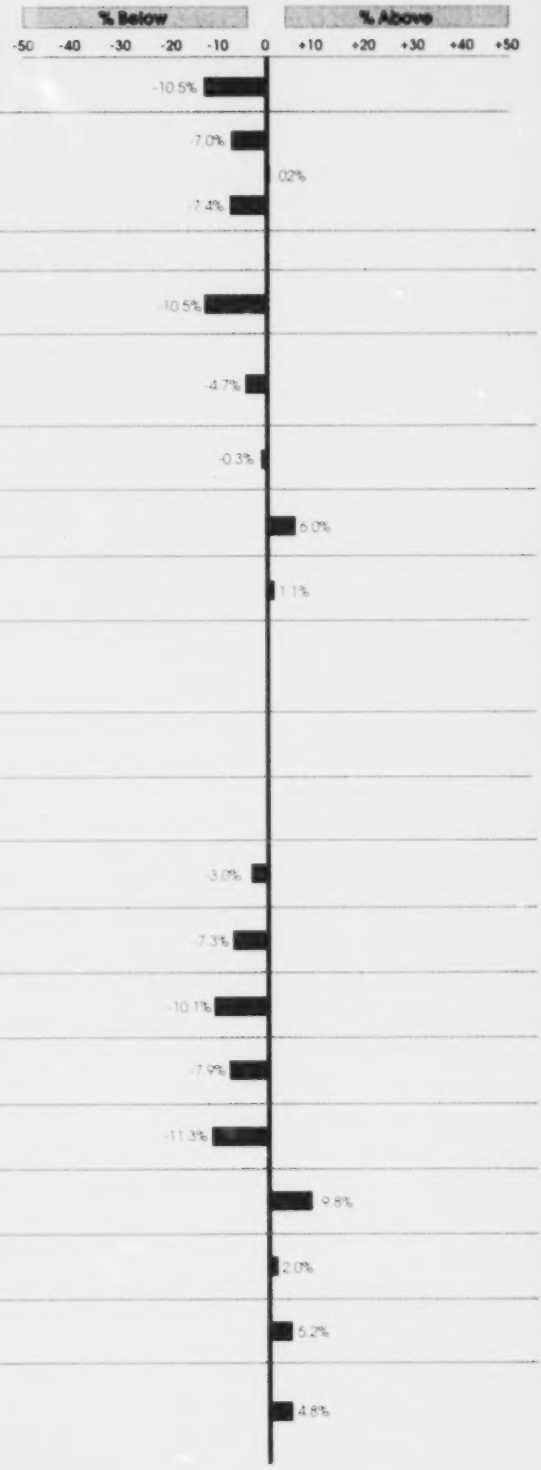
Drawing by
Amanda Snowman
Cony High School

Child Well-Being Indicators

= Percent Change from Maine KIDS COUNT 1997 Data Book

(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		28,667	9.4%
School children receiving subsidized school lunch, 1996-1997 school year	Total	65,774	28.8%
	Free	51,304	22.5%
	Reduced price	14,470	6.3%
▲ Children aged 0-17 participating in Medicaid, 1997		76,939	25.2%
Unemployed persons aged 16 and over, annual average, 1996		34,100	5.1%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		751	8.9
Live births for which prenatal care began in the first trimester, 1995		12,293	88.6%
Low birth-weight infants; live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		841	6.1%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		95	6.2
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		592.7	1.8
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		291.7	0.9
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		2,294	7.5
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		52.0	2.2
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		55.6	6.5
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		45.2	5.3
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		12.2	0.7
Domestic assaults reported to police, rate per 100,000 population, 1996		3,914	315.3
Arrests of children aged 10-17; rate per 1,000 children, 1996		12,965	90.4
High school dropouts, 1995-1996 school year		2,023	2.9%
High school graduates planning to attend post-secondary school, 1995-1996 school year		9,083	62.5%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		33,055	144.9



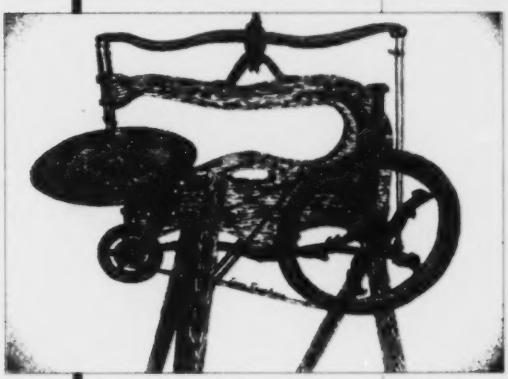
▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

ANDROSCOGGIN COUNTY PROFILE

General Information

		Number	Percent
Total Population, 1995 estimated		103,751	100.0%
Under 5 years		6,409	6.2%
5 to 9 years		7,717	7.4%
10 to 14 years		7,835	7.6%
15 years	1,471		1.4%
16 years	1,527		1.5%
17 years	1,455		1.4%
18 years	1,392		1.3%
19 years	1,446		1.4%
Total Population, aged 15 - 19		7,291	7.0%
Total Population, aged 0-19		29,252	28.2%
20 to 64 years		60,454	58.3%
65 years and over		14,045	13.5%
Children aged 0-19 who are: (1994 estimated)	White	28,699	98.2%
	Asian and Pacific Islander	242	0.8%
	American Indian	65	0.2%
	African	207	0.7%
Public school resident enrollment, 1996	Total	16,288	100.0%
	Grades K-8	11,786	72.4%
	Grades 9-12	4,502	27.6%
Private school resident enrollment, 1996	Total	1,416	100.0%
	Grades K-8	1,018	71.9%
	Grades 9-12	398	28.1%
Home-schooled students, 1996 annual average	Total	275	100.0%
	Grades K-8	219	79.6%
	Grades 9-12	56	20.4%
Adults 18 and over who have completed high school or equivalency, 1990		56,850	72.7%
Children at or below federal poverty line, 1990		5699	20.9%
Median household income, 1993 estimated		$30,145	
Women in labor force with youngest child under age 6, 1990		4,047	61.5%
Women in labor force with youngest child under aged 6 - 17, 1990		5,655	76.2%

Native American Basket Weaving
Drawing by
Alyson Mac,
Cony High School



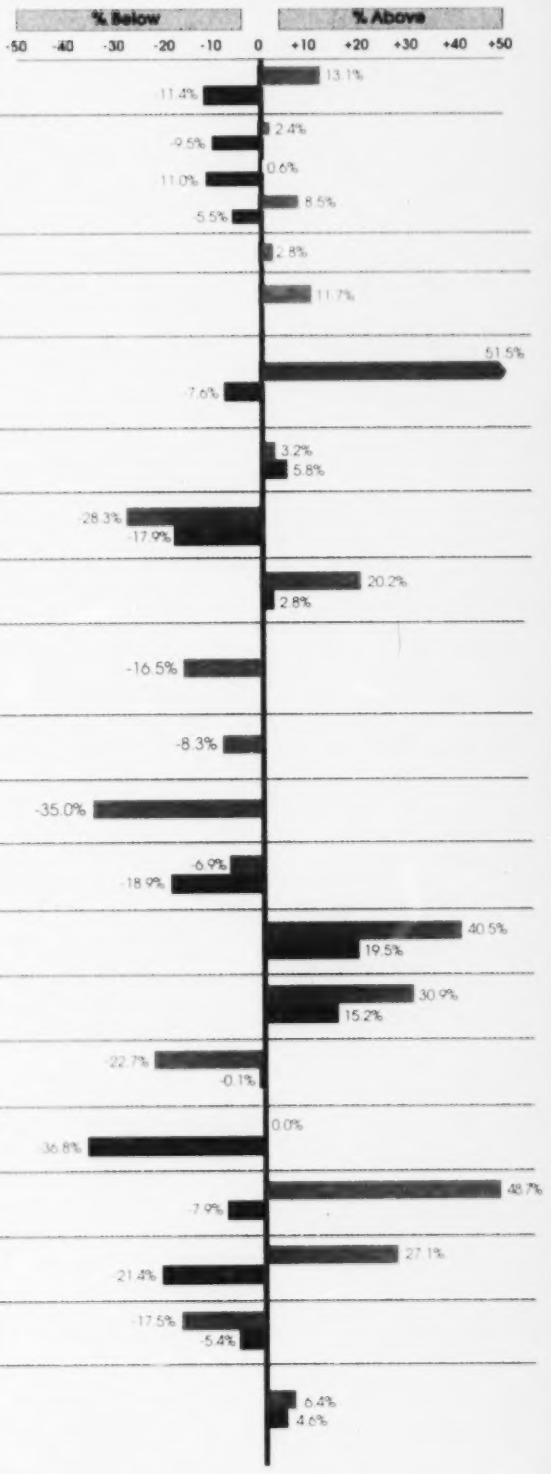
Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book

(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		2,808	10.6%
School children receiving subsidized school lunch, 1996-1997 school year	Total	5,424	29.5%
	Free	4,159	22.6%
	Reduced price	1,265	6.9%
▲ Children aged 0-17 participating in Medicaid, 1997		6,855	26.0%
Unemployed persons aged 16 and over, annual average, 1996		3,350	5.7%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		97	13.4
Live births for which prenatal care began in the first trimester, 1995		1,094	91.5%
Low birth-weight infants; live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		52	4.3%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		10	7.5
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		42.9	1.5
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		23.3	0.8
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		129	4.9
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		4.2	2.0
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		6.6	9.1
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		5.0	6.9
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		0.8	0.5
Domestic assaults reported to police, rate per 100,000 population, 1996		327	315.2
Arrests of children aged 10-17; rate per 1,000 children, 1996		1,651	134.4
High school dropouts, 1995-1996 school year		191	3.7%
High school graduates planning to attend post-secondary school, 1995-1996 school year		542	51.6%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		2,833	154.1

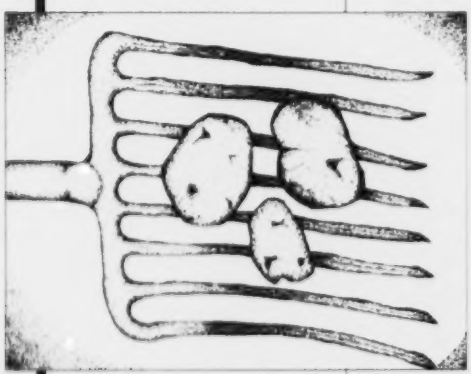


▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

AROOSTOOK COUNTY PROFILE

General Information

		Number	Percent
Total Population, 1995 estimated		78,633	100.0%
Under 5 years		4,365	5.6%
5 to 9 years		5,366	6.8%
10 to 14 years		5,707	7.3%
15 years		1,223	1.6%
16 years		1,160	1.5%
17 years		1,235	1.6%
18 years		1,054	1.3%
19 years		1,000	1.3%
Total Population, aged 15 - 19		5,672	7.2%
Total Population, aged 0-19		21,110	26.8%
20 to 64 years		45,775	58.2%
65 years and over		11,748	14.9%
Children aged 0-19 who are: (1994 estimated)	White	21,932	96.9
	Asian and Pacific Islander	144	0.6%
	American Indian	315	1.4%
	African	252	1.1%
Public school resident enrollment, 1996	Total	13,233	100.0%
	Grades K-8	8,991	67.9%
	Grades 9-12	4,242	32.1%
Private school resident enrollment, 1996	Total	0	
	Grades K-8	0	
	Grades 9-12	0	
Home-schooled students, 1996 annual average	Total	194	100.0%
	Grades K-8	157	80.9%
	Grades 9-12	37	19.1%
Adults 18 and over who have completed high school or equivalency, 1990		46,558	72.1%
Children at or below federal poverty line, 1990		5,081	22.7%
Median household income, 1993 estimated		$25,667	
Women in labor force with youngest child under age 6, 1990		2,391	47.4%
Women in labor force with youngest child under aged 6 - 17, 1990		4,616	71.0%



Potato Harvesting Aroostook County

Drawing by Christine Waterhouse, Cony High School

Child Well-Being Indicators

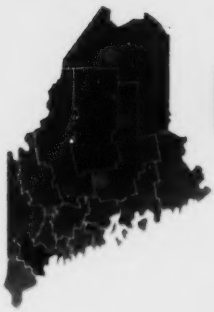
= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book

(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		2,154	11.3%
School children receiving subsidized school lunch, 1996-1997 school year	Total	5,697	41.4%
	Free	4,376	31.8%
	Reduced price	1,321	9.6%
▲ Children aged 0-17 participating in Medicaid, 1997		6,286	33.0%
Unemployed persons aged 16 and over, annual average, 1996		3,510	9.2%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		48	8.2
Live births for which prenatal care began in the first trimester, 1995		663	85.7%
Low birth-weight infants; live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		51	6.6%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		7	6.9
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		29.1	1.3
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		9.7	0.4
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		202	10.1
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		2.4	1.5
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		3.8	6.2
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		3.2	5.2
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		1.2	1.0
Domestic assaults reported to police, rate per 100,000 population, 1996		237	301.4
Arrests of children aged 10-17; rate per 1,000 children, 1996		1,103	118.3
High school dropouts, 1995-1996 school year		57	1.3%
High school graduates planning to attend post-secondary school, 1995-1996 school year		631	64.5%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year			

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

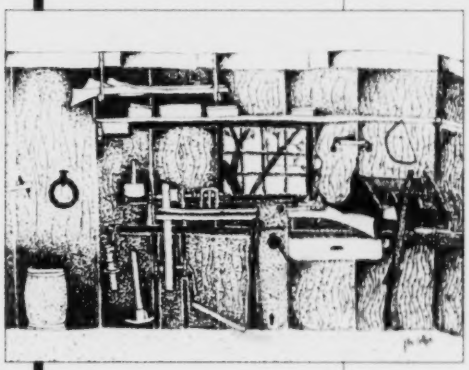


CUMBERLAND COUNTY PROFILE

General Information

		Number	Percent
Total Population, 1995 estimated		248,526	100.0%
Under 5 years		15,687	6.3%
5 to 9 years		17,326	7.0%
10 to 14 years		16,741	6.7%
15 years		3,129	1.3%
16 years		3,125	1.3%
17 years		2,934	1.2%
18 years		3,018	1.2%
19 years		3,159	1.3%
Total Population, aged 15 - 19		15,365	6.2%
Total Population, aged 0-19		65,119	26.2%
20 to 64 years		150,265	60.5%
65 years and over		33,142	13.3%
Children aged 0-19 who are: (1994 estimated)	White	61,880	97.4%
	Asian and Pacific Islander	995	1.6%
	American Indian	187	0.3%
	African	482	0.8%
Public school resident enrollment, 1996	Total	40,464	100.0%
	Grades K-8	29,089	71.9%
	Grades 9-12	11,375	28.1%
Private school resident enrollment, 1996	Total	2,815	100.0%
	Grades K-8	1,777	63.1%
	Grades 9-12	1,038	36.9%
Home-schooled students, 1996 annual average	Total	523	100.0%
	Grades K-8	416	79.5%
	Grades 9-12	107	20.5%
Adults 18 and over who have completed high school or equivalency, 1990		157,698	84.6%
Children at or below federal poverty line, 1990		9,157	16.0%
Median household income, 1993 estimated		$35,186	
Women in labor force with youngest child under age 6, 1990		9,039	61.5%
Women in labor force with youngest child under aged 6 - 17, 1990		11,831	77.1%

Early Patent Rifle Shop
John Hall, Portland (1813)
Drawing by
Josh Colfer
Cony High School



Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book

(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent	% Below / % Above (-50 -40 -30 -20 -10 0 +10 +20 +30 +40 +50)
▲ Children aged 0-17 on AFDC in August, 1997		4,815	8.2%	-13.1% -9.1%
School children receiving subsidized school lunch, 1996-1997 school year	Total	9,082	20.1%	-30.3% -15.4%
	Free	7,066	15.6%	-30.4% -16.1%
	Reduced price	2,016	4.5%	-29.6% -13.5%
▲ Children aged 0-17 participating in Medicaid, 1997		11,618	19.7%	21.9%
Unemployed persons aged 16 and over, annual average, 1996		4,120	2.9%	-42.6% -19.4%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		111	7.3	-17.8% -7.9%
Live births for which prenatal care began in the first trimester, 1995		2,790	91.7%	3.5% 0.9%
Low birth-weight infants; live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		175	5.8%	-5.1% 7.5%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		17	5.3	-14.3% -1.7%
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		148.0	2.3	29.4%
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		87.9	1.4	59.0%
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		450	7.7	2.5%
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		8.4	1.8	-14.9% 6.8%
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		7.0	4.5	-30.1% -3.8%
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		6.0	3.9	-26.3% -7.6%
1.2 Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		0.4	-0.4%	-45.3% -0.4%
Domestic assaults reported to police, rate per 100,000 population, 1996		962	387.1	22.8% -14.1%
Arrests of children aged 10-17, rate per 1,000 children, 1996		2,329	89.8	-0.6% 10.5%
High school dropouts, 1995-1996 school year		360	3.4%	18.6% 13.4%
High school graduates planning to attend post-secondary school, 1995-1996 school year		1,495	70.4%	12.7% 11.1%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		5,483	121.4	-16.2% 1.0%

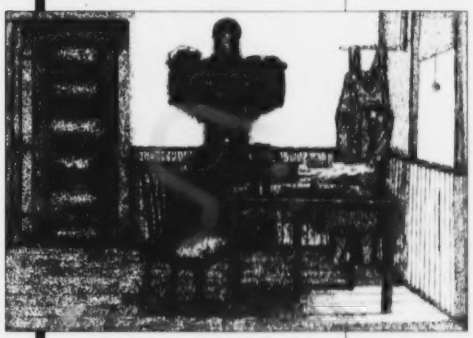
▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

FRANKLIN COUNTY PROFILE

General Information

		Number	Percent
Total Population, 1995 estimated		29,511	100.0%
Under 5 years		1,678	5.7%
5 to 9 years		2,064	7.0%
10 to 14 years		2,278	7.7%
15 years		452	1.5%
16 years		433	1.5%
17 years		451	1.5%
18 years		559	1.9%
19 years		622	2.1%
Total Population, aged 15 - 19		2,517	8.5%
Total Population, aged 0-19		8,537	28.9%
20 to 64 years	17,152	58.1%	
65 years and over		3,822	13.0%
Children aged 0-19 who are: (1994 estimated)	White	8,654	99.2%
	Asian and Pacific Islander	32	0.4%
	American Indian	24	- 0.3%
	African	12	0.1%
Public school resident enrollment, 1996	Total	5,359	100.0%
	Grades K-8	3,798	70.9%
	Grades 9-12	1,561	29.1%
Private school resident enrollment, 1996	Total	78	100.0%
	Grades K-8	4	5.1%
	Grades 9-12	74	94.9%
Home-schooled students, 1996 annual average	Total	127	100.0%
	Grades K-8	91	71.7%
	Grades 9-12	36	28.3%
Adults 18 and over who have completed high school or equivalency, 1990		17,146	80.2%
Children at or below federal poverty line, 1990		1,669	21.9%
Median household income, 1993 estimated		$27,267	
Women in labor force with youngest child under age 6, 1990		911	57.2%
Women in labor force with youngest child under aged 6 - 17, 1990		1,626	76.4%

Early Maine Kitchen
Drawing by
Luke Boulange
Corny High School



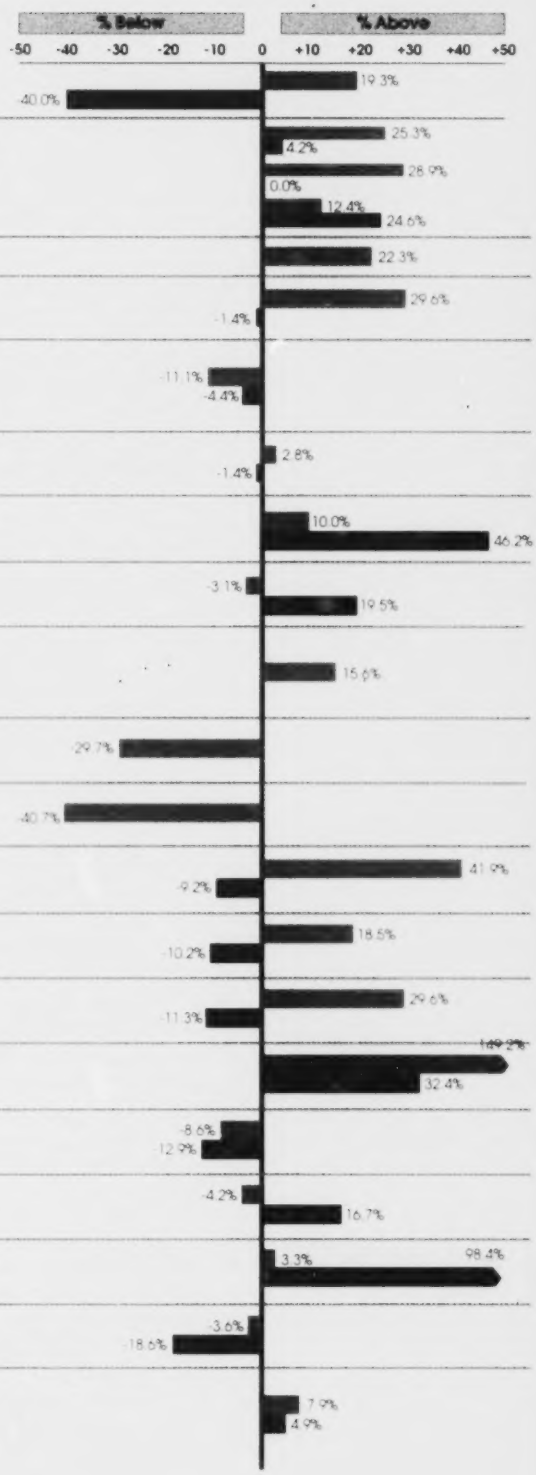
Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book

(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		825	11.2%
School children receiving subsidized school lunch, 1996-1997 school year	Total	1,985	36.1%
	Free	1,593	29.0%
	Reduced price	392	7.1%
▲ Children aged 0-17 participating in Medicaid, 1997		2,270	30.9%
Unemployed persons aged 16 and over, annual average, 1996		1,000	6.6%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		18	7.9
Live births for which prenatal care began in the first trimester, 1995		246	91.1%
Low birth-weight infants; live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		18	6.7%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		2	6.0
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		17.3	2.0
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		5.2	0.6
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		33	4.4
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		1.8	3.1
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		1.8	7.7
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		1.6	6.8
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		0.8	1.8
Domestic assaults reported to police, rate per 100,000 population, 1996		85	288.0
Arrests of children aged 10-17; rate per 1,000 children, 1996		313	86.6
High school dropouts, 1995-1996 school year		46	2.8%
High school graduates planning to attend post-secondary school, 1995-1996 school year		259	60.2%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		859	156.3



▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

HANCOCK COUNTY PROFILE

"This summer I went to Acadia National Park. There are only 12 deer in captivity. It is really fun to take the carriage ride. It's also fun to hike or bike the mountain. When I went to Acadia, we saw 3 deer. We also saw 2 hedgehogs. When it started to rain we (went to) Jordan's Pond House. At about 4:00 we went and loaded up the bikes and left..."

- Joe Lajoie
Augusta, Lincoln School

General Information

		Number	Percent
Total Population, 1995 estimated		49,272	100.0%
Under 5 years		2,850	5.8%
5 to 9 years		3,422	6.9%
10 to 14 years		3,652	7.4%
15 years		635	1.3%
16 years		648	1.3%
17 years		607	1.2%
18 years		577	1.2%
19 years		579	1.2%
Total Population, aged 15 - 19		3,046	6.2%
Total Population, aged 0-19		12,970	26.3%
20 to 64 years		28,617	58.1%
65 years and over		7,685	15.6%
Children aged 0-19 who are: (1994 estimated)	White	12,445	98.8%
	Asian and Pacific Islander	60	0.5%
	American Indian	58	0.5%
	African	31	0.2%
Public school resident enrollment, 1996	Total	8,322	100.0%
	Grades K-8	6,202	74.5%
	Grades 9-12	2,120	25.5%
Private school resident enrollment, 1996		528	100.0%
	Grades K-8	91	17.2%
	Grades 9-12	437	82.8%
Home-schooled students, 1996 annual average	Total	144	100.0%
	Grades K-8	125	86.8%
	Grades 9-12	19	13.2%
Adults 18 and over who have completed high school or equivalency, 1990		29,552	83.1%
Children at or below federal poverty line, 1990		1,747	15.3%
Median household income, 1993 estimated		$28,954	
Women in labor force with youngest child under age 6, 1990		1,572	56.5%
Women in labor force with youngest child under aged 6 - 17, 1990		2,264	73.0%

Early Sardine Processing in Maine
Drawing by
Samantha Brooke
Cony High School

Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book
(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		658	5.6%
School children receiving subsidized school lunch, 1996-1997 school year	Total	2,405	26.9%
	Free	1,805	20.2%
	Reduced price	600	6.7%
▲ Children aged 0-17 participating in Medicaid, 1997		2,585	21.9%
Unemployed persons aged 16 and over, annual average, 1996		1,590	5.9%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		23	7.5
Live births for which prenatal care began in the first trimester, 1995		401	83.9%
Low birth-weight infants: live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		27	5.6%
Infant mortality: rate per 1,000 live births, five-year average, 1991-1995		3	4.8
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		31.8	2.5
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		8.4	0.6
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		99	8.5
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		2.6	2.8
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		2.8	9.3
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		2.4	79.4
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		0.4	6.3
Domestic assaults reported to police, rate per 100,000 population, 1996		117	237.5
Arrests of children aged 10-17; rate per 1,000 children, 1996		374	67.5
High school dropouts, 1995-1996 school year		68	2.7%
High school graduates planning to attend post-secondary school, 1995-1996 school year		333	60.8%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		1,341	150.2

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

KENNEBEC COUNTY PROFILE

"...I have lived in Augusta all my life....If you come from somewhere else you might like the Maine State Museum or Fort Western. For fun you could go to the Children's Discovery Museum, or bowling, (or) skating...I like living in Augusta."

Stephanie Drisko
Augusta

General Information

		Number	Percent
Total Population, 1995 estimated		117,000	100.0%
Under 5 years		6,849	5.9%
5 to 9 years		7,929	6.8%
10 to 14 years		8,752	7.5%
15 years		1,839	1.6%
16 years		1,708	1.5%
17 years		1,685	1.4%
18 years		1,657	1.4%
19 years		1,655	1.4%
Total Population, aged 15 - 19		8,544	7.3%
Total Population, aged 0-19		32,074	27.4%
20 to 64 years		68,694	58.7%
65 years and over		16,232	13.9%
Children aged 0-19 who are: (1994 estimated)	White	31,865	98.6%
	Asian and Pacific Islander	239	0.7%
	American Indian	110	0.3%
	African	96	0.3%
Public school resident enrollment, 1996	Total	20,042	100.0%
	Grades K-8	14,849	74.1%
	Grades 9-12	5,193	25.9%
Private school resident enrollment, 1996	Total	1,493	100.0%
	Grades K-8	687	46.0%
	Grades 9-12	806	54.0%
Home-schooled students, 1996 annual average	Total	239	100.0%
	Grades K-8	195	81.6%
	Grades 9-12	44	18.4%
Adults 18 and over who have completed high school or equivalency, 1990		68,347	78.9%
Children at or below federal poverty line, 1990		5,046	17.2%
Median household income, 1993 estimated		$32,609	
Women in labor force with youngest child under age 6, 1990		4,076	61.0%
Women in labor force with youngest child under aged 6 - 17, 1990		6,647	78.5%

Granite Quarrying, Plug and Feather Technique, Hallowell, Maine (late 1800's)
Drawing by
Bunravi Say
Cony High School

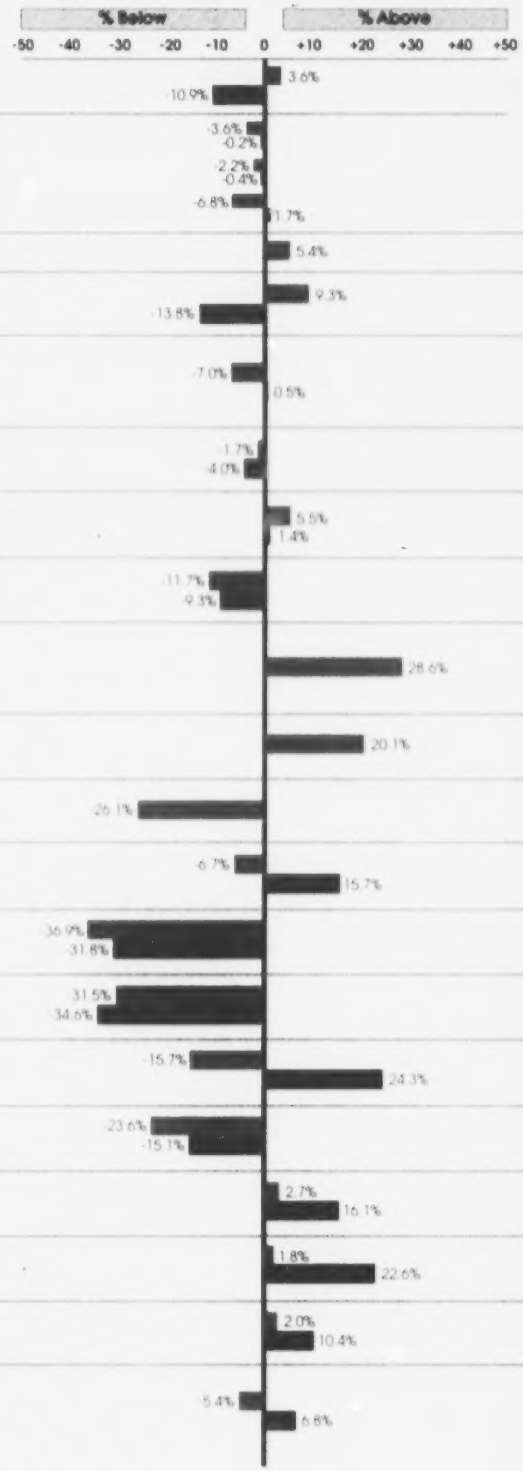
Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book

(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		2,802	9.7%
School children receiving subsidized school lunch, 1996-1997 school year	Total	6,066	27.9%
	Free	4,781	22.0%
	Reduced price	1,285	5.9%
▲ Children aged 0-17 participating in Medicaid, 1997		7,648	26.6%
Unemployed persons aged 16 and over, annual average, 1996		3,480	5.6%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		68	8.2
Live births for which prenatal care began in the first trimester, 1995		1,076	87.1%
Low birth-weight infants; live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		79	6.4%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		8	5.5
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		72.1	2.3
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		33.2	1.0
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		159	5.5
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		4.6	2.0
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		3.4	4.1
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		3.0	3.6
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		1.0	0.6
Domestic assaults reported to police, rate per 100,000 population, 1996		282	241.0
Arrests of children aged 10-17, rate per 1,000 children, 1996		1,298	92.8
High school dropouts, 1995-1996 school year		181	2.9%
High school graduates planning to attend post-secondary school, 1995-1996 school year		748	63.8%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		2,978	137.0



▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

KNOX COUNTY **PROFILE**

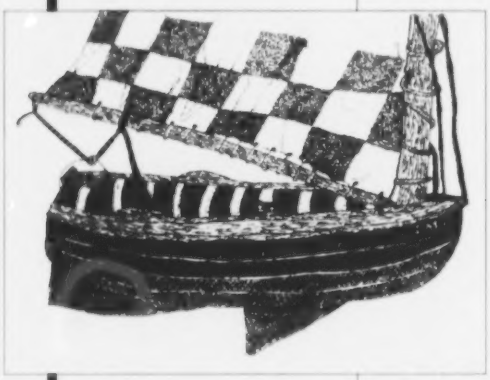
"This summer I went to Morris Farm Day Camp in Wiscasset. There were pigs, ducks, chickens, hens, a rooster, geese, and cows. My favorite part was working in the garden. We got to prepare broccoli for spring."

- **Patrick Kennedy**
Lincoln School, Augusta

General Information

		Number	Percent
Total Population, 1995 estimated		37,372	100.0%
Under 5 years		2,070	5.5%
5 to 9 years		2,592	6.9%
10 to 14 years		2,788	7.5%
15 years		486	1.3%
16 years		513	1.4%
17 years		509	1.4%
18 years		420	1.1%
19 years		363	1.0%
Total Population, aged 15 - 19		2,291	6.1%
Total Population, aged 0-19		9,741	26.1%
20 to 64 years		21,115	56.5%
65 years and over		6,516	17.4%
Children aged 0-19 who are: (1994 estimated)	White	9,410	99.0%
	Asian and Pacific Islander	38	0.4%
	American Indian	39	0.4%
	African	16	0.2%
Public school resident enrollment, 1996	Total	5,752	100.0%
	Grades K-8	4,345	75.5%
	Grades 9-12	1,407	24.5%
Private school resident enrollment, 1996	Total	27	100.0%
	Grades K-8	25	92.6%
	Grades 9-12	2	7.4%
Home-schooled students 1996 annual average	Total	80	100.0%
	Grades K-8	63	78.7%
	Grades 9-12	17	21.2%
Adults 18 and over who have completed high school or equivalency, 1990		22,017	80.1%
Children at or below federal poverty line, 1990		1,839	20.7%
Median household income, 1993 estimated		$28,375	
Women in labor force with youngest child under age 6, 1990		1,279	61.7%
Women in labor force with youngest child under aged 6 - 17, 1990		1,919	76.7%

North Haven Dinghy J.O. Brown Shipyard, North Haven, Maine (1885-90)
Drawing by
Kate Allerding
Cony High School



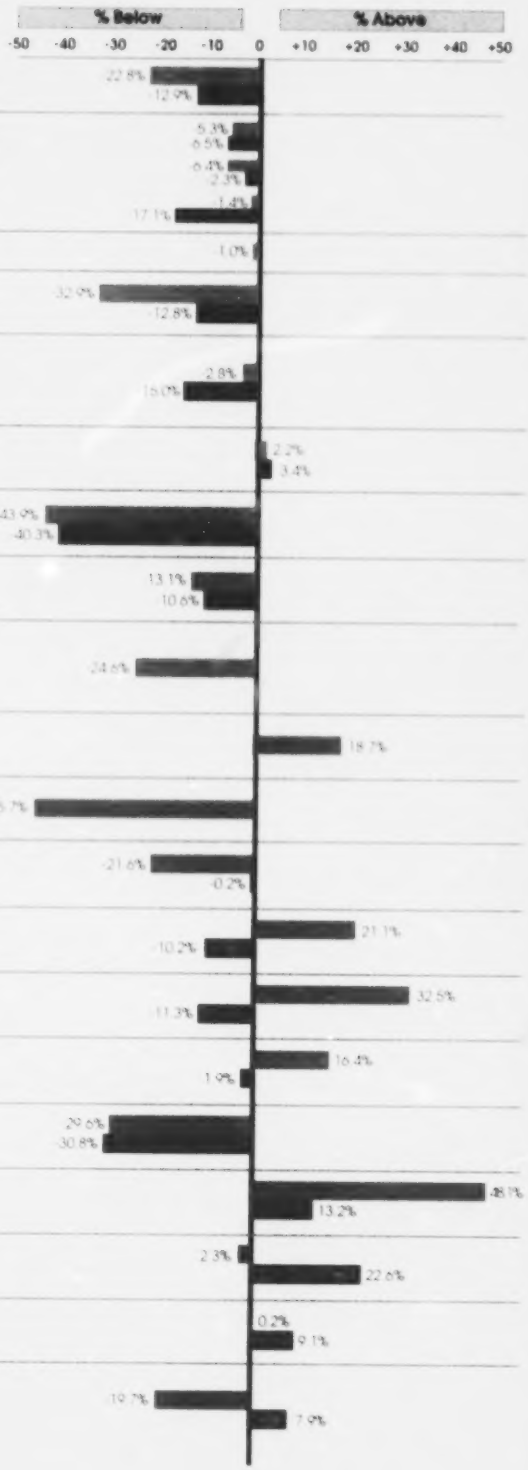
Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book

(Those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		650	7.3%
School children receiving subsidized school lunch, 1996-1997 school year	Total	1,629	27.3%
	Free	1,256	21.0%
	Reduced price	373	6.3%
▲ Children aged 0-17 participating in Medicaid, 1997		2,239	25.0%
Unemployed persons aged 16 and over, annual average, 1996		760	3.4%
Births to unmarried teenaged mothers who have not completed 12 years of school, rate per 1,000 females aged 10-19, five-year average, 1991-1995		21	8.6
Live births for which prenatal care began in the first trimester, 1995		346	90.6%
Low birth-weight infants: live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		13	3.4%
Infant mortality: rate per 1,000 live births, five-year average, 1991-1995		2	5.4
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs): full time equivalent rate per 1,000 children aged 0-19, 1995		12.9	1.3
General practice dentists: full time equivalent rate per 1,000 children aged 0-19, 1994		9.9	1.0
Children under age 18 in Department of Human Services care or custody: rate per 1,000 children under age 18, July 1996		36	4.1
Child deaths: rate per 10,000 children aged 1-14, five-year average, 1991-1995		1.2	1.7
Teen deaths: rate per 10,000 children aged 15-19, five-year average, 1991-1995		1.8	7.8
Teen violent deaths: rate per 10,000 children aged 15-19, five-year average, 1991-1995		1.6	7.0
Child suicides: rate per 10,000 children aged 10-19, five-year average, 1991-1995		0.8	-1.9%
Domestic assaults reported to police, rate per 100,000 population, 1996		83	222.1
Arrests of children aged 10-17, rate per 1,000 children, 1996		575	133.8
High school dropouts, 1995-1996 school year		42	2.8%
High school graduates planning to attend post-secondary school, 1995-1996 school year		176	62.6%
Children with special needs as reported to the Department of Education: rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		694	116.3



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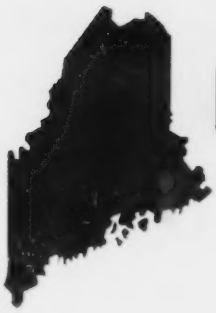

LINCOLN COUNTY PROFILE

General Information

		Number	Percent
Total Population, 1995 estimated		31,334	100.0
Under 5 years		1,734	5.5%
5 to 9 years		2,137	6.8%
10 to 14 years		2,321	7.4%
15 years		475	1.5%
16 years		457	1.5%
17 years		466	1.5%
18 years		363	1.2%
19 years		348	1.1%
Total Population, aged 15 - 19		2,109	6.7%
Total Population, aged 0-19		8,301	26.5%
20 to 64 years		17,598	56.2%
65 years and over		5,435	17.3%
Children aged 0-19 who are (1994 estimated)	White	8,091	99.0%
	Asian and Pacific Islander	19	0.2%
	American Indian	49	0.6%
	African	10	0.1%
Public school resident enrollment, 1996	Total	5,357	100.0%
	Grades K-8	3,989	74.5%
	Grades 9-12	1,368	25.5%
Private school resident enrollment, 1996	Total	570	100.0%
	Grades K-8	77	13.5%
	Grades 9-12	493	86.5%
Home-schooled students, 1996 annual average	Total	87	100.0%
	Grades K-8	76	87.4%
	Grades 9-12	11	12.6%
Adults 18 and over who have completed high school or equivalency, 1990		18,357	80.8%
Children at or below federal poverty line, 1990		1,010	13.2%
Median household income, 1993 estimated		$31,350	
Women in labor force with youngest child under age 6, 1990		939	54.0%
Women in labor force with youngest child under aged 6 - 17, 1990		1,484	72.5%

Maine Sailor
Drawing by
Johanna Morrison
Cony High School

Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book
(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		553	7.3%
School children receiving subsidized school lunch, 1996-1997 school year	Total	1,497	25.2%
	Free	1,122	18.9%
	Reduced price	375	6.3%
▲ Children aged 0-17 participating in Medicaid, 1997		1,623	21.4%
Unemployed persons aged 16 and over, annual average, 1996		680	3.9%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		18	8.9
Live births for which prenatal care began in the first trimester, 1995		296	90.5%
Low birth-weight infants; live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		26	8.0%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		2	5.2
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		16.0	1.6
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		11.7	1.4
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		37	4.9
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		0.2	0.3
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		1.6	7.7
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		1.4	6.8
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		0.6	1.4
Domestic assaults reported to police, rate per 100,000 population, 1996		67	213.8
Arrests of children aged 10-17; rate per 1,000 children, 1996		124	33.3
High school dropouts, 1995-1996 school year		50	2.6%
High school graduates planning to attend post-secondary school, 1995-1996 school year		207	56.7%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		1,073	180.4

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

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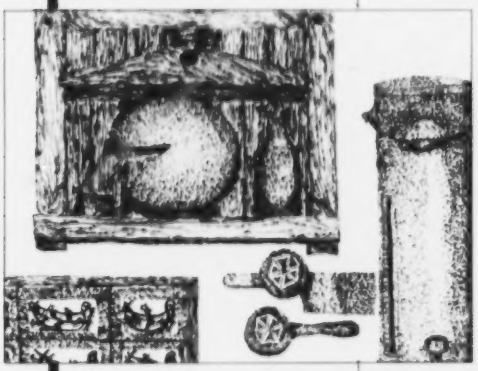
OXFORD COUNTY PROFILE

General Information

		Number	Percent
Total Population, 1995 estimated		53,440	100.0%
Under 5 years		3,096	5.8%
5 to 9 years		3,954	7.4%
10 to 14 years		4,071	7.6%
15 years		872	1.6%
16 years		859	1.6%
17 years		824	1.5%
18 years		633	1.2%
19 years		516	1.0%
Total Population, aged 15 - 19		3,704	6.9%
Total Population, aged 0-19		14,825	27.7%
20 to 64 years	30,267	56.6%	
65 years and over	8,348	15.6%	
Children aged 0-19 who are: (1994 estimated)	White	14,532	99.1%
	Asian and Pacific Islander	59	0.4%
	American Indian	35	0.2%
	African	34	0.2%
Public school resident enrollment, 1996	Total	10,087	100.0%
	Grades K-8	7,250	71.9%
	Grades 9-12	2,837	28.1%
Private school resident enrollment, 1996	Total	1,233	100.0%
	Grades K-8	301	24.4%
	Grades 9-12	932	75.6%
Home-schooled students, 1996 annual average	Total	202	100.0%
	Grades K-8	162	80.2%
	Grades 9-12	40	19.8%
Adults 18 and over who have completed high school or equivalency, 1990		29,516	76.3%
Children at or below federal poverty line, 1990		2,924	21.0%
Median household income, 1993 estimated		$26,918	
Women in labor force with youngest child under age 6, 1990		1,818	59.2%
Women in labor force with youngest child under aged 6 - 17, 1990		2,795	72.8%

Early Maine Dairy Products and Cheese Press
Rumford, Maine (1840)
Drawing by
Erika Hefferman
Cony High School



Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book
(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent	% Below -50 -40 -30 -20 -10	% Above 0 +10 +20 +30 +40 +50
▲ Children aged 0-17 on AFDC in August, 1997		1,389	10.2%	-13.0%	8.0%
School children receiving subsidized school lunch, 1996-1997 school year	Total	3,987	34.6%	-1.4%	20.0%
	Free	3,114	27.0%	-0.7%	20.2%
	Reduced price	873	7.6%	-2.6%	19.4%
▲ Children aged 0-17 participating in Medicaid, 1997		3,739	27.3%		8.3%
Unemployed persons aged 16 and over, annual average, 1996		1,650	6.2%	-12.7%	22.5%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		41	11.0		24.1% 2.5%
Live births for which prenatal care began in the first trimester, 1995		465	83.5%	-5.8% -1.9%	
Low birth-weight infants; live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		49	8.8%		45.1% 45.0%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		4	6.2	-0.2%	6.6%
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		23.7	1.6	-9.0%	
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		6.1	0.4	-53.3%	
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		76	5.7	-24.6%	
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		2.4	2.2		3.4% 0.6%
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		3.8	10.5	-14.7%	62.8%
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		3.0	8.3	-17.7%	58.1%
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		1.3	-17.6%	-17.6%	87.4%
Domestic assaults reported to police, rate per 100,000 population, 1996		144	269.5	-14.5% -2.8%	
Arrests of children aged 10-17; rate per 1,000 children, 1996		288	43.5	-51.9%	13.6%
High school dropouts, 1995-1996 school year		168	5.1%	-11.8%	77.8%
High school graduates planning to attend post-secondary school, 1995-1996 school year		387	62.9%		0.7% 22.7%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		1,726	149.8		3.4% 3.8%

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

PENOBSCOT COUNTY PROFILE

General Information

		Number	Percent
Total Population, 1995 estimated		145,905	100.0%
Under 5 years		8,254	5.7%
5 to 9 years		9,750	6.7%
10 to 14 years		10,296	7.1%
15 years		2,130	1.5%
16 years		2,085	1.4%
17 years		1,956	1.3%
18 years		2,306	1.6%
19 years		2,771	1.9%
Total Population, aged 15 - 19		11,248	7.7%
Total Population, aged 0-19		39,548	27.1%
20 to 64 years		87,992	60.3%
65 years and over		18,365	12.6%
Children aged 0-19 who are: (1994 estimated)	White	39,712	97.7%
	Asian and Pacific Islander	320	0.8%
	American Indian	453	1.1%
	African	171	0.4%
Public school resident enrollment, 1996	Total	24,711	100.0%
	Grades K-8	17,302	70.0%
	Grades 9-12	7,409	30.0%
Private school resident enrollment, 1996	Total	1,111	100.0%
	Grades K-8	416	37.4%
	Grades 9-12	695	62.6%
Home-schooled students, 1996 annual average	Total	390	100.0%
	Grades K-8	331	84.9%
	Grades 9-12	59	15.1%
Adults 18 and over who have completed high school or equivalency, 1990		89,100	80.3%
Children at or below federal poverty line, 1990		8,934	25.0%
Median household income, 1993 estimated		$29,515	
Women in labor force with youngest child under age 6, 1990		4,493	54.7%
Women in labor force with youngest child under aged 6 - 17, 1990		7,528	71.1%

Native American Basket Weaving
Drawing by
Alyson Mac
Cony High School

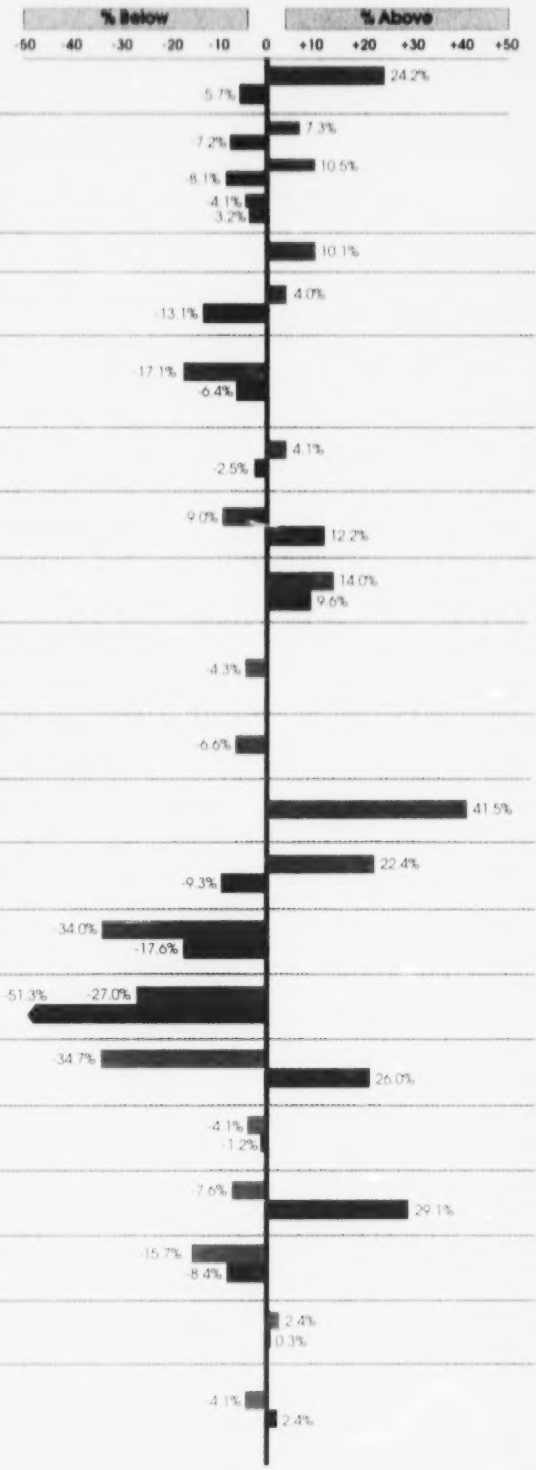
Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book

(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		4,025	11.7%
School children receiving subsidized school lunch, 1996-1997 school year	Total	8,122	30.9%
	Free	6,525	24.9%
	Reduced price	1,597	6.1%
▲ Children aged 0-17 participating in Medicaid, 1997		9,579	27.8%
Unemployed persons aged 16 and over, annual average, 1996		4,070	5.3%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		78	7.4
Live births for which prenatal care began in the first trimester, 1995		1,354	92.2%
Low birth-weight infants; live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		81	5.5%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		12	7.1
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		66.5	1.7
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		32.2	0.8
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		375	10.6
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		7.2	2.6
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		5.0	4.3
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		3.0	2.6
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		1.0	0.4
Domestic assaults reported to police, rate per 100,000 population, 1996		441	302.3
Arrests of children aged 10-17; rate per 1,000 children, 1996		1,375	83.5
High school dropouts, 1995-1996 school year		210	2.4%
High school graduates planning to attend post-secondary school, 1995-1996 school year		1,120	64.0%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		3,649	139.0



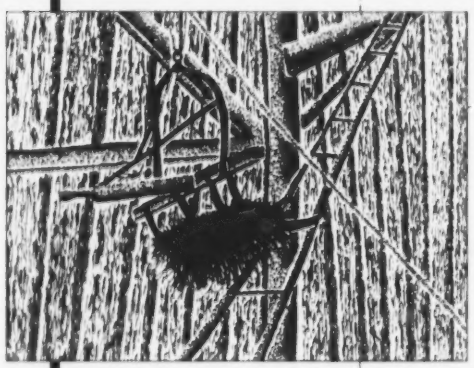
▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

PISCATAQUIS COUNTY PROFILE

General Information

		Number	Percent
Total Population, 1995 estimated		18,486	100.0%
Under 5 years		952	5.1%
5 to 9 years		1,172	6.3%
10 to 14 years		1,384	7.5%
15 years		327	1.8%
16 years		317	1.7%
17 years		306	1.7%
18 years		266	1.4%
19 years		193	1.0%
Total Population, aged 15 - 19		1,409	7.6%
Total Population, aged 0-19		4,917	26.6%
20 to 64 years		10,438	56.5%
65 years and over		3,131	16.9%
Children aged 0-19 who are: (1994 estimated) -	White	5,064	98.8%
	Asian and Pacific Islander	28	0.5%
	American Indian	21	0.4%
	African	15	0.3%
Public school resident enrollment, 1996	Total	3,222	100.0%
	Grades K-8	2,456	76.2%
	Grades 9-12	766	23.8%
Private school resident enrollment, 1996	Total	479	100.0%
	Grades K-8	5	1.0%
	Grades 9-12	474	99.0%
Home-schooled students, 1996 annual average	Total	53	100.0%
	Grades K-8	33	62.3%
	Grades 9-12	20	37.7%
Adults 18 and over who have completed high school or equivalency, 1990		10,123	74.8%
Children at or below federal poverty line, 1990		1,192	24.2%
Median household income, 1993 estimated		$25,631	
Women in labor force with youngest child under age 6, 1990		641	59.1%
Women in labor force with youngest child under aged 6 - 17, 1990		960	66.6%

Tobey Hay Fork
Sebec, Maine (1850)
Drawing by
Jen Bonsant
Cony High School

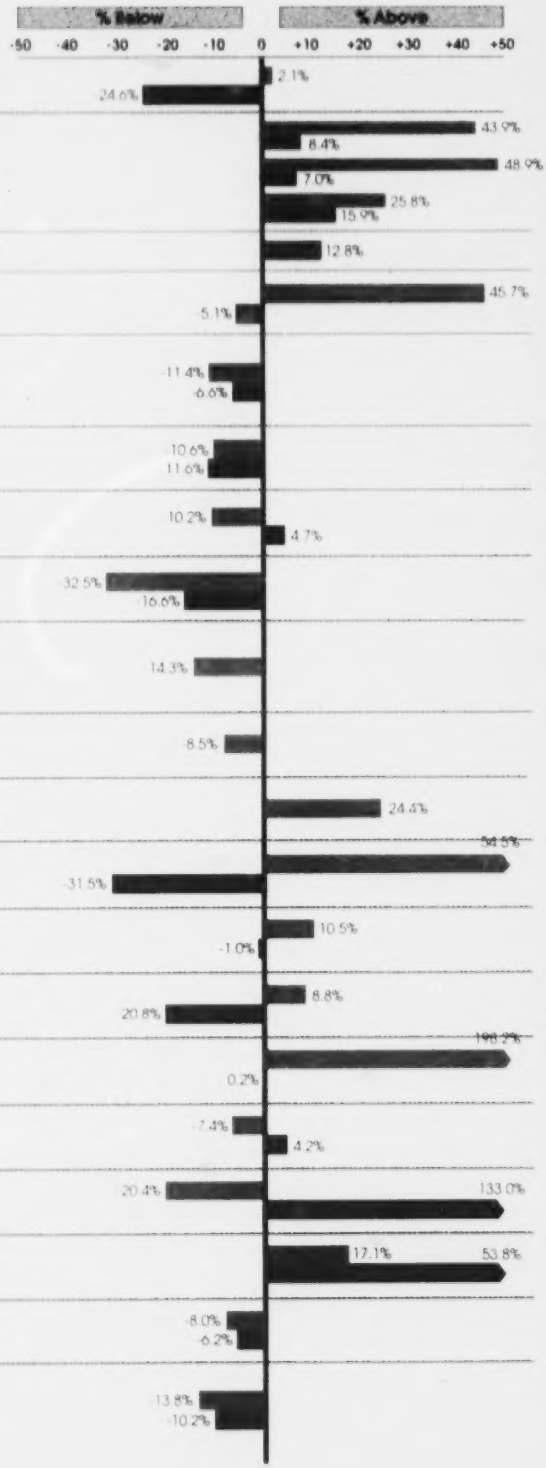


Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book
(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		428	9.6%
School children receiving subsidized school lunch, 1996-1997 school year	Total	1,554	41.5%
	Free	1,255	33.5%
	Reduced price	299	8.0%
▲ Children aged 0-17 participating in Medicaid, 1997		1,269	28.5%
Unemployed persons aged 16 and over, annual average, 1996		650	7.4%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		11	7.9
Live births for which prenatal care began in the first trimester, 1995		160	79.2%
Low birth-weight infants: live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		11	5.4%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		1	4.2
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		7.4	1.5
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		4.2	0.8
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		42	9.3
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		1.2	3.3
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		1.0	7.1
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		0.8	5.7
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		0.6	2.1
Domestic assaults reported to police, rate per 100,000 population, 1996		54	292.1
Arrests of children aged 10-17; rate per 1,000 children, 1996		168	72.0
High school dropouts, 1995-1996 school year		43	3.4%
High school graduates planning to attend post-secondary school, 1995-1996 school year		161	57.5%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		468	124.9



▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

SAGADAHOC COUNTY PROFILE

General Information

		Number	Percent
Total Population, 1995 estimated		33,960	100.0%
Under 5 years		2,136	6.3%
5 to 9 years		2,647	7.8%
10 to 14 years		2,496	7.3%
15 years		460	1.4%
16 years		454	1.3%
17 years		431	1.3%
18 years		377	1.1%
19 years		346	1.0%
Total Population, aged 15 - 19		2,068	6.1%
Total Population, aged 0-19		9,347	27.5%
20 to 64 years		20,959	61.7%
65 years and over	3,654	10.8%	
Children aged 0-19 who are: (1994 estimated)	White	9,328	97.6%
	Asian and Pacific Islander	100	1.0%
	American Indian	18	0.2%
	African	111	1.2%
Public school resident enrollment, 1996	Total	6,512	100.0%
	Grades K-8	4,615	70.9%
	Grades 9-12	1,897	29.1%
Private school resident enrollment, 1996	Total	232	100.0%
	Grades K-8	34	14.7%
	Grades 9-12	198	85.3%
Home-schooled students 1996 annual average	Total	132	100.0%
	Grades K-8	108	81.8%
	Grades 9-12	24	18.2%
Adults 18 and over who have completed high school or equivalency, 1990		19,801	80.4%
Children at or below federal poverty line, 1990		1,140	12.7%
Median household income, 1993 estimated		$36,228	
Women in labor force with youngest child under age 6, 1990		1,115	50.3%
Women in labor force with youngest child under aged 6 - 17, 1990		1,923	77.3%

St. Mary Ship Phippsburg, Maine (Launched 1890)
Drawing by
Shaun Burchell
Coney High School

Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book

(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		526	6.1%
School children receiving subsidized school lunch, 1996-1997 school year	Total	1,318	19.3%
	Free	920	13.5%
	Reduced price	398	5.8%
▲ Children aged 0-17 participating in Medicaid, 1997		1,554	18.0%
Unemployed persons aged 16 and over, annual average, 1996		650	4.0%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		20	8.7
Live births for which prenatal care began in the first trimester, 1995		350	90.7%
Low birth-weight infants; live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		18	4.7
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		3	7.5
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		19.1	2.0
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		6.8	0.7
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		29	3.2
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		1.4	2.0
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		2.2	10.1
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		1.8	8.2
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		0.2	0.4
Domestic assaults reported to police, rate per 100,000 population, 1996		136	400.5
Arrests of children aged 10-17; rate per 1,000 children, 1996		316	82.3
High school dropouts, 1995-1996 school year		56	2.8%
High school graduates planning to attend post-secondary school, 1995-1996 school year		334	68.3%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		1,188	173.8

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PROFILE

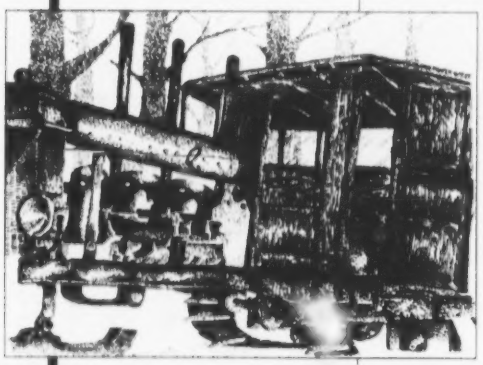
...The best thing I like about Maine is the wildlife. I love to see animals run free."

- **Jamie Bridges**
Lincoln School, Augusta

General Information

		Number	Percent
Total Population, 1995 estimated		51,346	100.0%
Under 5 years		3,099	6.0%
5 to 9 years		3,616	7.0%
10 to 14 years		4,045	7.9%
15 years		853	1.7%
16 years		828	1.6%
17 years		832	1.6%
18 years		669	1.3%
19 years		530	1.0%
Total Population, aged 15 - 19		3,712	7.2%
Total Population, aged 0-19		14,472	28.2%
20 to 64 years		29,933	58.3%
65 years and over		6,941	13.5%
Children aged 0-19 who are: (1994 estimated)	White	14,754	99.0%
	Asian and Pacific Islander	51	0.3%
	American Indian	62	0.4%
	African	36	0.2%
Public school resident enrollment, 1996	Total	8,726	100.0%
	Grades K-8	6,029	69.1%
	Grades 9-12	2,697	30.9%
Private school resident enrollment, 1996	Total	683	100.0%
	Grades K-8	175	25.6%
	Grades 9-12	508	74.4%
Home-schooled students 1996 annual average	Total	188	100.0%
	Grades K-8	159	84.6%
	Grades 9-12	29	15.4%
Adults 18 and over who have completed high school or equivalency, 1990		25,934	71.7%
Children at or below federal poverty line, 1990		3,244	23.7%
Median household income, 1993 estimated		$26,099	
Women in labor force with youngest child under age 6, 1990		1,635	56.8%
Women in labor force with youngest child under aged 6 - 17, 1990		2,714	72.5%

Lombard Log Hauler
Alvino Lombard, Inventor
Drawing by
Norman Stickney
Cony High School



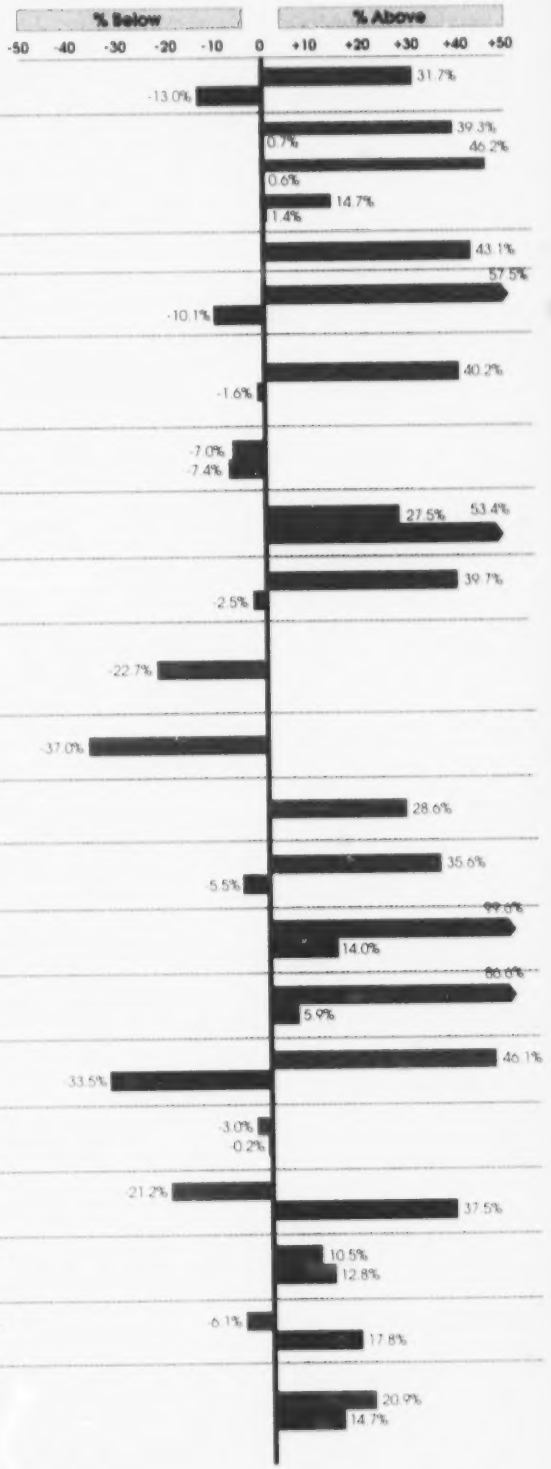
Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book

(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		1,643	12.4%
School children receiving subsidized school lunch, 1996-1997 school year	Total	3,887	40.2
	Free	3,183	32.9%
	Reduced price	704	7.3%
▲ Children aged 0-17 participating in Medicaid, 1997		4,793	36.1%
Unemployed persons aged 16 and over, annual average, 1996		2,160	8.0%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		47	12.4
Live births for which prenatal care began in the first trimester, 1995		490	82.4%
Low birth-weight infants; live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		46	7.7%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		5	8.7
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		19.6	1.4
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		8.2	0.5
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		127	9.6
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		3.0	2.9
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		5.0	12.9
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		3.8	9.8
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		0.8	1.0
Domestic assaults reported to police, rate per 100,000 population, 1996		157	305.8
Arrests of children aged 10-17; rate per 1,000 children, 1996		467	71.2
High school dropouts, 1995-1996 school year		107	3.2%
High school graduates planning to attend post-secondary school, 1995-1996 school year		425	58.7%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		1,696	175.2



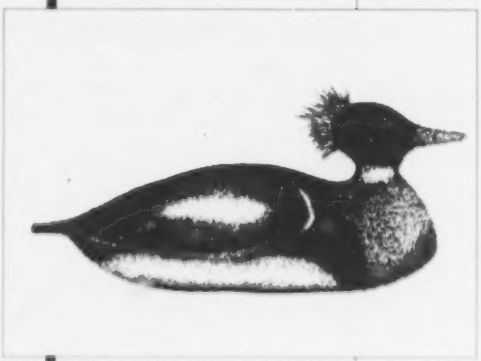
▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

WALDO COUNTY PROFILE

General Information

		Number	Percent
Total Population, 1995 estimated		35,707	100.0%
Under 5 years		2,208	6.2%
5 to 9 years		2,573	7.2%
10 to 14 years		2,773	7.8%
15 years		596	1.7%
16 years		577	1.6%
17 years		557	1.6%
18 years		515	1.4%
19 years		425	1.2%
Total Population, aged 15 - 19		2,670	7.5%
Total Population, aged 0-19		10,224	28.6%
20 to 64 years		20,582	57.6%
65 years and over		4,901	13.7%
Children aged 0-19 who are: (1994 estimated)	White	9,942	99.1%
	Asian and Pacific Islander	35	0.3%
	American Indian	38	0.4%
	African	15	0.1%
Public school resident enrollment, 1996	Total	5,783	100.0%
	Grades K-8	4,388	75.9%
	Grades 9-12	1,395	24.1%
Private school resident enrollment, 1996	Total	0	
	Grades K-8	0	
	Grades 9-12	0	
Home-schooled student 1996 annual average	Total	182	100.0%
	Grades K-8	149	81.9%
	Grades 9-12	33	18.1%
Adults 18 and over who have completed high school or equivalency, 1990		18,661	77.5%
Children at or below federal poverty line, 1990		2,122	23.7%
Median household income, 1993 estimated		$25,585	
Women in labor force with youngest child under age 6, 1990		1,042	52.5%
Women in labor force with youngest child under aged 6 - 17, 1990		1,806	69.6%

Duck Decoy
Drawing by
Duncan Cheney
Cony High School

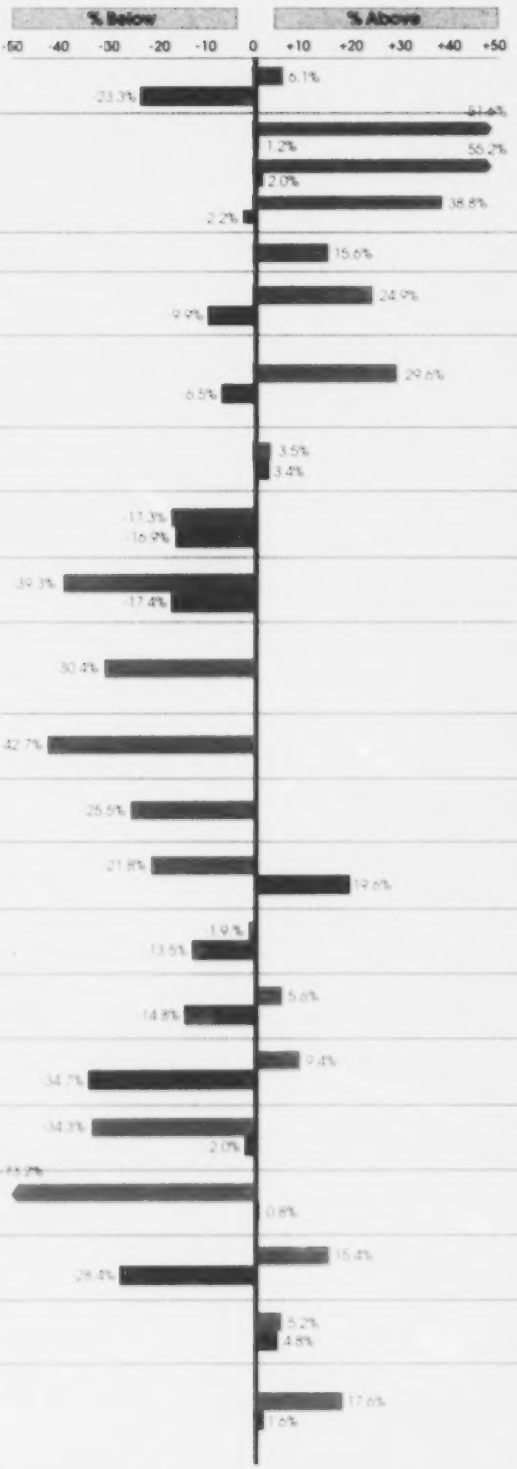


Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book

(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)



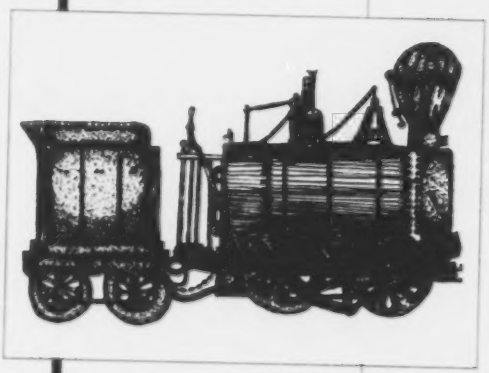
		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		926	10.0%
School children receiving subsidized school lunch, 1996-1997 school year	Total	2,547	43.7%
	Free	2,034	34.9%
	Reduced price	513	8.8%
▲ Children aged 0-17 participating in Medicaid, 1997		2,708	29.2%
Unemployed persons aged 16 and over, annual average, 1996		1,190	6.4%
Births to unmarried teenaged mothers who have not completed 12 years of school: rate per 1,000 females aged 10-19, five-year average, 1991-1995		29	11.5
Live births for which prenatal care began in the first trimester, 1995		366	91.7%
Low birth-weight infants: live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		20	5.0%
Infant mortality: rate per 1,000 live births, five-year average, 1991-1995		2	3.8
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs): full time equivalent rate per 1,000 children aged 0-19, 1995		12.5	1.2
General practice dentists: full time equivalent rate per 1,000 children aged 0-19, 1994		5.3	0.5
Children under age 18 in Department of Human Services care or custody: rate per 1,000 children under age 18, July 1996		51	5.6
Child deaths: rate per 10,000 children aged 1-14, five-year average, 1991-1995		1.2	1.7
Teen deaths: rate per 10,000 children aged 15-19, five-year average, 1991-1995		1.6	6.3
Teen violent deaths: rate per 10,000 children aged 15-19, five-year average, 1991-1995		1.4	5.5
Child suicides: rate per 10,000 children aged 10-19, five-year average, 1991-1995		0.7	-34.7%
Domestic assaults reported to police, rate per 100,000 population, 1996		74	207.2
Arrests of children aged 10-17, rate per 1,000 children, 1996		109	24.2
High school dropouts, 1995-1996 school year		48	3.3%
High school graduates planning to attend post-secondary school, 1995-1996 school year		184	65.7%
Children with special needs as reported to the Department of Education, rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		993	170.4

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

WASHINGTON COUNTY PROFILE

General Information

		Number	Percent
Total Population, 1995 estimated		36,156	100.0%
Under 5 years		2,114	5.8%
5 to 9 years		2,346	6.5%
10 to 14 years		2,711	7.5%
15 years		604	1.7%
16 years		535	1.5%
17 years		574	1.6%
18 years		538	1.5%
19 years		504	1.4%
Total Population, aged 15 - 19		2,755	7.6%
Total Population, aged 0-19		9,926	27.5%
20 to 64 years		20,180	55.8%
65 years and over		6,050	16.7%
Children aged 0-19 who are: (1994 estimated)	White	9,188	93.3%
	Asian and Pacific Islander	24	0.2%
	American Indian	605	6.1%
	African	30	0.3%
Public school resident enrollment, 1996	Total	5,807	100.0%
	Grades K-8	4,244	73.1%
	Grades 9-12	1,563	26.9%
Private school r resident enrollment, 1996	Total	418	100.0%
	Grades K-8	80	19.1%
	Grades 9-12	338	80.9%
Home-schooled students 1996 annual average	Total	104	100.0%
	Grades K-8	80	76.9%
	Grades 9-12	24	23.1%
Adults 18 and over who have completed high school or equivalency, 1990		19,228	73.2%
Children at or below federal poverty line, 1990		2,840	31.3%
Median household income, 1993 estimated		$23,003	
Women in labor force with youngest child under age 6, 1990		782	40.6%
Women in labor force with youngest child under aged 6 - 17, 1990		1,662	64.2%



Lion Locomotive Machiasport (1846)
Drawing by
Brook Harding Cony High School

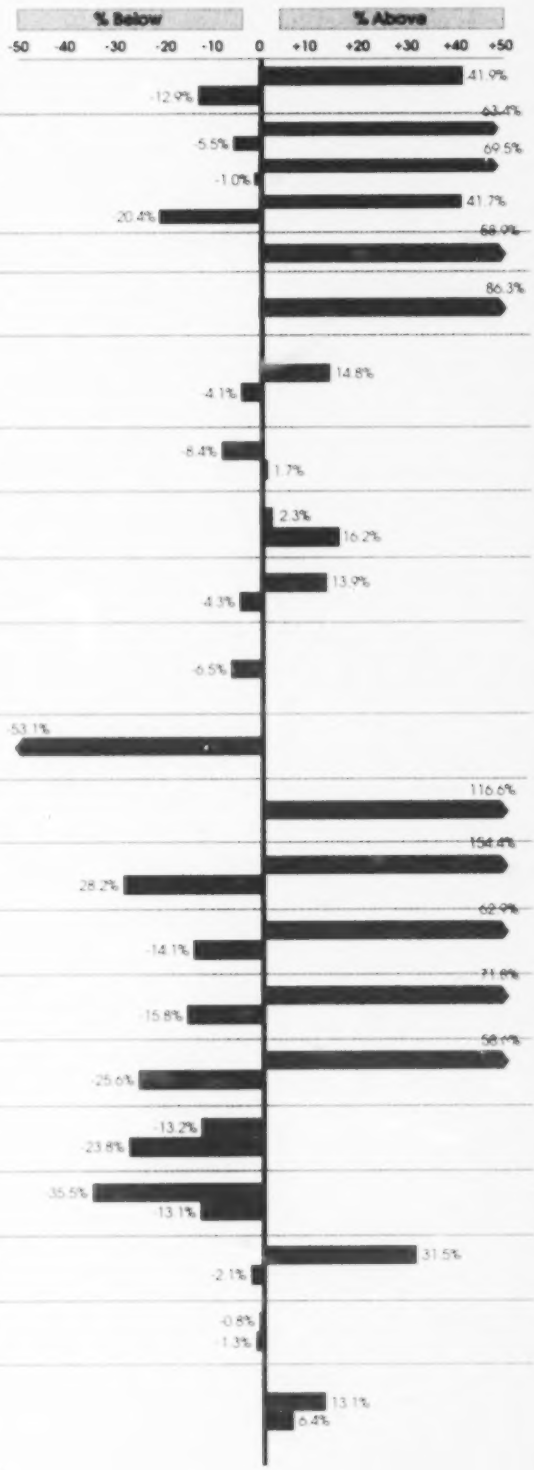
Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book

(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		1,185	13.3%
School children receiving subsidized school lunch, 1996-1997 school year	Total	2,982	47.1%
	Free	2,413	38.1%
	Reduced price	569	9.0%
▲ Children aged 0-17 participating in Medicaid, 1997		3,562	40.1%
Unemployed persons aged 16 and over, annual average, 1996		1,590	9.5%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		27	10.2
Live births for which prenatal care began in the first trimester, 1995		314	81.1%
Low birth-weight infants: live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		24	6.2%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		3	7.1
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		16.3	1.6
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		4.5	0.4
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		144	16.2
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		3.8	5.5
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		2.8	10.5
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		2.4	9.0
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		0.6	1.1
Domestic assaults reported to police, rate per 100,000 population, 1996		99	273.8
Arrests of children aged 10-17; rate per 1,000 children, 1996		258	58.3
High school dropouts, 1995-1996 school year		77	3.8%
High school graduates planning to attend post-secondary school, 1995-1996 school year		261	62.0%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		1037	163.8



▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

YORK COUNTY PROFILE

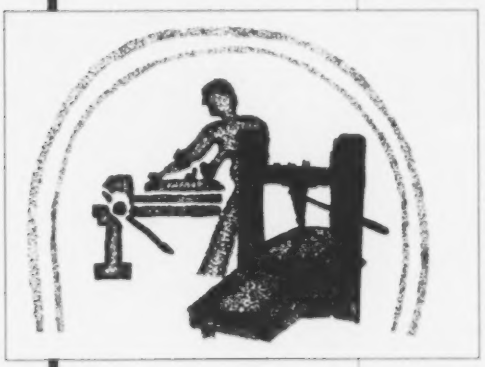
"I love Maine...One of the reasons is... NO CRIME! Like in a lot of big cities like L.A. and New York City. Also, Maine has a variety of things to do from a nice picnic in Bar Harbor to Fun Town in Saco..."

- **Sara Thurston**
Lincoln School, Augusta

General Information

		Number	Percent
Total Population, 1995 estimated		170,984	100.0%
Under 5 years		11,012	6.4%
5 to 9 years		12,307	7.2%
10 to 14 years		12,702	7.4%
15 years		2,481	1.5%
16 years		2,403	1.4%
17 years		2,428	1.4%
18 years		1,968	1.2%
19 years		1,829	1.1%
Total Population, aged 15 - 19		11,109	6.5%
Total Population, aged 0-19		47,130	27.6%
20 to 64 years		101,724	59.5%
65 years and over		22,130	12.9%
Children aged 0-19 who are: (1994 estimated)	White	45,813	98.2%
	Asian and Pacific Islander	525	1.1%
	American Indian	104	0.2%
	African	220	0.5%
Public school resident enrollment, 1996	Total	29,674	100.0%
	Grades K-8	22,734	76.6%
	Grades 9-12	6,940	23.4%
Private school resident enrollment, 1996	Total	2,322	100.0%
	Grades K-8	1,238	53.3%
	Grades 9-12	1,084	46.7%
Home-schooled students 1996 annual average	Total	472	100.0%
	Grades K-8	362	76.7%
	Grades 9-12	110	23.3%
Adults 18 and over who have completed high school or equivalency, 1990		96,545	79.5%
Children at or below federal poverty line, 1990		4,541	10.5%
Median household income, 1993 estimated		$35,912	
Women in labor force with youngest child under age 6, 1990		6,480	62.7%
Women in labor force with youngest child under aged 6 - 17, 1990		9,055	76.2%

Turn of the Century Maine Printing Press
Drawing by
Kirsten Pendorf
Cony High School



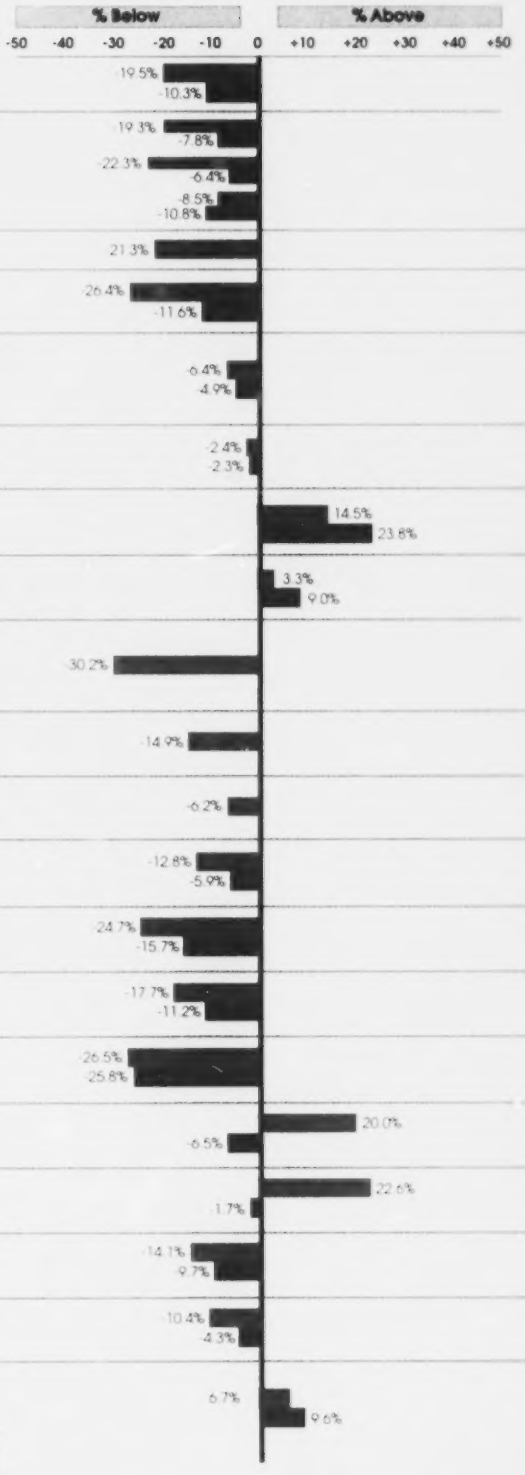
Child Well-Being Indicators

= Percent Above or Below Statewide Average

= Percent Change from Maine KIDS COUNT 1997 Data Book

(those indicators for which comparable data were included in the Maine KIDS COUNT 1997 Data Book)

		Number	Rate or Percent
▲ Children aged 0-17 on AFDC in August, 1997		3,280	7.6%
School children receiving subsidized school lunch, 1996-1997 school year	Total	7,582	23.3%
	Free	5,692	17.5%
	Reduced price	1,890	5.8%
▲ Children aged 0-17 participating in Medicaid, 1997		8,609	19.9%
Unemployed persons aged 16 and over, annual average, 1996		3,630	3.8%
Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995		94	8.3
Live births for which prenatal care began in the first trimester, 1995		1,882	86.5%
Low birth-weight infants; live births under 2,500 grams (5.5 pounds) as a percent of all live births, 1995		151	6.9%
Infant mortality; rate per 1,000 live births, five-year average, 1991-1995		15	6.4
▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full time equivalent rate per 1,000 children aged 0-19, 1995		57.8	1.2
General practice dentists; full time equivalent rate per 1,000 children aged 0-19, 1994		35.0	0.7
Children under age 18 in Department of Human Services care or custody; rate per 1,000 children under age 18, July 1996		305	7.0
Child deaths; rate per 10,000 children aged 1-14, five-year average, 1991-1995		6.4	1.9
Teen deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		5.4	48.6
Teen violent deaths; rate per 10,000 children aged 15-19, five-year average, 1991-1995		4.8	43.2
Child suicides; rate per 10,000 children aged 10-19, five-year average, 1991-1995		1.2	0.5
Domestic assaults reported to police, rate per 100,000 population, 1996		647	378.4
Arrests of children aged 10-17; rate per 1,000 children, 1996		2,217	110.8
High school dropouts, 1995-1996 school year		231	2.5%
High school graduates planning to attend post-secondary school, 1995-1996 school year		1,099	56.0%
Children with special needs as reported to the Department of Education; rate per 1,000 students enrolled in public and private schools, 1996-1997 school year		5,036	154.6



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▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

Definitions and Sources of Data

▲ Adolescent female heads of household as a percent of all female heads of household on AFDC in June, 1997.

The number of female heads of household under the age of 18 receiving Aid to Families with Dependent Children in June, 1997. Percent is this number divided by the total number of female heads of household on AFDC in June, 1997.

Source: Maine Department of Human Services, Bureau of Family Independence.

See also: Children aged 0-17 on AFDC in October 1997; Children aged 0-17 on AFDC, mean monthly number in calendar 1996; State AFDC and Food Stamp benefits as a percent of poverty line in 1996.

Adults aged 18 and over who have completed high school or equivalency, 1990.

Includes persons whose highest degree was a high school diploma or its equivalent, persons who attended college or professional school, and persons who received a college, university, or professional degree. Persons who reported completing the 12th grade but not receiving a diploma are not included. Percent calculated using a denominator of 1990 Census population data for adults aged 18 and over.

Source: U.S. Bureau of the Census, September 1992. Table P60, 1990 Census of Population and Housing Summary Tape File 3a.

See also: High school completions.

▲ AFDC cases open for more than 12 months as of June, 1997.

The number of Maine households which received AFDC benefits for more than 12 months from the time of the most recent case opening, as a percent of the total households receiving AFDC benefits in June, 1997.

Source: Maine Department of Human Services, Bureau of Family Independence.

See also: Adolescent female heads of household as a percent of all female heads of household on AFDC; Children aged 0-17 on AFDC in October 1997; Children aged 0-17 on AFDC, mean monthly number in calendar 1996; State AFDC and Food Stamp benefits as a percent of poverty line in 1996.

Alcohol-related license suspensions for drivers under age 21; rate per 1,000 licensed drivers under age 21, 1996.

Number of license suspensions for drivers under age 21 with a blood alcohol count of .02 or greater during 1996. Rate is that number divided by the total number of licensed drivers under age 21 in 1996.

Source: Maine Bureau of Highway Safety.

See also: OUI arrests for drivers under age 21.

Alcohol use

See: Alcohol-related license suspensions for drivers under age 21; Children aged 0-14 using services of licensed alcohol and drug abuse treatment providers; OUI arrests for drivers under age 21; High school students reporting alcohol use within past 30 days; Youth aged 15-19 using services of licensed alcohol and drug abuse treatment providers.

Arrests for crimes against persons of children aged 10-17; rate per 1,000 children aged 10-17, 1996.

Total number of arrests of children aged 10-17 for crimes against persons including: murder and non-negligent manslaughter, forcible rape, robbery, and aggravated assault; does not include other assaults. The annual arrest data count all arrests of youth for crimes against persons during calendar year 1996, including repeated offenses by the same individual. Rate is the total number of arrests for crimes against persons divided by the estimated number of 10-17 year-olds in July, 1995, using data prepared by the Office of Data, Research and Vital Statistics. National rate is for 1994.

Source: Maine Department of Public Safety, Uniform Crime Reports, 1996; 1994 national rate from the Annie E. Casey Foundation, *Kids Count Data Book: State Profiles of Child Well-being*, 1997.

Arrests of children aged 10-17; rate per 1,000 children aged 10-17, 1996.

Total number of arrests of children aged 10-17 for crimes including manslaughter, rape, robbery, aggravated assault, burglary, larceny, motor vehicle theft, forgery and counterfeiting, fraud, stolen property, vandalism, possession of a weapon, prostitution, sex offenses, drug and alcohol related offenses, violation of liquor laws, driving under the influence, drunkenness, disorderly conduct, and curfew and loitering law violations. The annual arrest data counts all arrests of youth for offenses during calendar year 1996, including repeated offenses by the same individual. Rate is the number of arrests divided by the estimated number of 10-17 year-olds in July, 1995, using data prepared by the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Public Safety, Uniform Crime Reports, 1996.

Births to married teenaged mothers as a percent of total live births, 1995.

The percent of total live births to married women under age 20 in calendar year 1995. Births are reported by the mother's place of residence at the time of birth.

Source: Maine Department of Human Services, Office of Data, Research, and Vital Statistics.

See also: Teen pregnancy rate.

Births to single teenaged mothers as a percent of total live births, 1995.

The percent of total live births to unmarried women under age 20 in calendar year 1995. Births are reported by the mother's place of residence at the time of birth.

Source: Maine Department of Human Services, Office of Data, Research, and Vital Statistics.

C1

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

Births to unmarried teenaged mothers who have not completed 12 years of school; rate per 1,000 females aged 10-19, five-year average, 1991-1995.

Births to unmarried females aged 10 through 19 who have either not completed high school and are still in school, or who have dropped out of school. The data reflect the mother's place of residence at the time of birth. They are averaged over a five-year period (1991-1995) to smooth out annual fluctuations, and as a rate per 1,000 females aged 10 through 19 residing in the area during the five-year period. Population data used in the denominators to calculate the rates are based on estimates developed by the Office of Data, Research, and Vital Statistics.

Source: Special tabulations by the Maine Department of Human Services, Office of Data, Research, and Vital Statistics.

Child abuse

See: Requests for child abuse and neglect services; Substantiated child abuse and neglect victims.

Child and teen suicides; rate per 100,000 children aged 10-19, five-year average, 1991-1995.

Deaths of children aged 10 through 19 for which suicide was listed as the cause. The data are reported by the childs place of residence, not the place of death. They are averaged over a five-year period (1991-1995) to smooth out annual fluctuations and to protect confidentiality. Population data used in the denominators to calculate the rates are based on estimates developed by the Office of Data, Research, and Vital Statistics. Rates are calculated per 100,000 at the state level to be consistent with standard mortality data reporting practices, per 10,000 at the county level for ease in interpreting relatively rare occurrences and small base populations.

Source: Special tabulations by the Maine Department of Human Services, Office of Data, Research and Vital Statistics; 1995 national rate from National Center for Health Statistics.

See also: High school students reporting at least one suicide attempt in the last year.

Beverly A. Ludden

● New Indicator

> ***I want my daughter*** *to have an incentive to get an education. My mom never graduated, and I didn't think it was a big deal. If she didn't do it, why should I? My boyfriend graduated. I thought if I did it, Chelsea would too. I want her to be every thing she can possibly be."*
>
> **Theresa**
> *The Community School, Camden*

Child day care, August 1997.

Total licensed and registered slots refers to the number of day care spaces for children available statewide in facilities licensed and registered by the Department of Human Services, Bureau of Child and Family Services, in August, 1997.

Source: Maine Department of Human Services, Office of Child Care and Head Start.

See also: Head Start Program.

Child deaths; rate per 100,000 children aged 1-14, five-year average, 1991-1995.

Deaths from all causes to children from ages 1 through 14 per 100,000 children in this age range. The data are reported by the childs place of residence, not the place of death. They are averaged over a five-year period (1991-1995) to smooth out annual fluctuations. Population data used in the denominators to calculate the rates are based on estimates developed by the Office of Data, Research, and Vital Statistics. Rates are calculated per 100,000 at the state level to be consistent with standard mortality data reporting practices, per 10,000 at the county level for ease in interpreting relatively rare occurrences and small base populations.

Source: Special tabulations by the Maine Department of Human Services, Office of Data, Research and Vital Statistics; 1994 national rate from the Annie E. Casey Foundation, *Kids Count Data Book: State Profiles of Child Well-being, 1997.*

See also: Infant mortality; Teen deaths; Teen violent deaths.

Child support enforcement, cases with collection, 1994.

The number of families with children for which the state child support enforcement agency successfully collected child support payments due, as a percent of the total number of families on the agencys caseload during state fiscal year 1994. In this year, Maine ranked 5th in the nation in terms of successful cases.

Source: U.S. Department of Health and Human Services, Office of Child Support Enforcement, published in Childrens Defense Fund, *The State of Americas Children Yearbook 1997.*

Children aged 0-14 using services of licensed alcohol and drug abuse treatment providers; rate per 1,000 children aged 0-14, 1996.

The number of individual children aged birth through 14 using services provided by Maine alcohol and drug abuse treatment facilities with state funding, Driver Education Evaluation Program certification, or certification to dispense methadone, during calendar year 1996. Population data used in the denominator to calculate rates are 1995 estimates developed by the Office of Data, Research, and Vital Statistics.

Source: Maine Addiction Treatment System, Maine Department of Mental Health, Mental Retardation, and Substance Abuse Services.

See also: Alcohol-related license suspensions for drivers under age 21; OUI arrests for drivers under age 21; High school students reporting alcohol use within past 30 days; High school students reporting use of inhalants at any time during their life; High school students reporting marijuana use within past 30 days; High school students reporting use of any form of cocaine within past 30 days; Youth aged 15-19 using services of licensed alcohol and drug abuse treatment providers.

▲ Children aged 0-17 on AFDC in August, 1997.

The total number of children aged birth through 17 who were receiving Aid to Families with Dependent Children grants in August, 1997. Percent is this number divided by the estimated number of children aged 0-17 in Maine in 1995 developed by the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Human Services, Bureau of Family Independence.

See also: Adolescent female heads of households on AFDC in June, 1997; State AFDC and Food Stamp benefits as a percent of poverty line in 1996.

Children aged 0-17 on AFDC, mean monthly number in calendar year 1996.

The number of children aged birth through 17 receiving Aid to Families with Dependent Children for each of 11 months of calendar 1996, divided by 11. Only eleven months of data from 1996 were used to calculate the average because data from August, 1996 were not available. Percent is that number divided by the estimated number of children aged 0-17 in Maine in 1995 prepared by the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Human Services, Bureau of Family Independence.

See also: Adolescent female heads of households on AFDC in June, 1997; State AFDC and Food Stamp benefits as a percent of poverty line in 1996.

Children aged 0-17 in Department of Human Services care or custody; rate per 1,000 children aged 0-17, July 1996.

Children ordered into Department of Human Services custody as a result of a child protection hearing where the child is found to be in jeopardy, a juvenile hearing where it would be contrary to the child's health and welfare to remain in the care or custody of his parents, or a divorce and/or custody hearing where neither parent has been found able to provide a home in the best interest of the child. Children come into the Department's care when parent or other legal guardians place them voluntarily in that care as part of that parent's short-term plan to resume full care of the children. The rate is calculated per 1,000 children aged birth through 17 using 1995 population estimates developed by the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Human Services, Bureau of Child and Family Services.

Children aged 0-17 living at or below federal poverty line, five-year average, 1992-1996.

The estimated average percent of related children aged birth through 17 who lived in families with incomes below the U.S. poverty threshold during the five-year period 1992-1996. In 1996, the poverty threshold for a family of four (two adults and two children) was $15,911. Related children include the family head's children by birth, marriage, or adoption, as well as other persons aged birth through 17, such as nephews and nieces, who are related to the family head. Children aged birth through 17 who do not live in a household where they are related to the head of the household are not counted. Rate is calculated using census population estimates for all children aged birth through 17. Five-year averages are used to smooth out annual fluctuations due to small sample size.

Source: U.S. Department of Commerce, Bureau of the Census, Current Population Survey (March supplement), 1992-1996; national indicator as published in the Annie E. Casey Foundation, *Kids Count Data Book: State Profiles of Child Well-being*, 1997.

See also: Jobs that pay a liveable wage; Median household income; Median income of families with children.

A. Steinberg

Children aged 0-17 living in homeless or emergency shelters, rate per 1,000 children aged 0-17, March 1997.

Individual children aged birth through 17 staying in one of Maines homeless or emergency shelters during March of 1997, with or without other family members. This number may include children whose primary residence is out of state. It is also important to note that not all of the states homeless or emergency shelters admit children.

Source: Maine State Housing Authority.

Children aged 0-17 not living with a parent, 1990.

Children aged birth through 17 who did not live in the same household with at least one of their parents in 1990. Parenthood is determined by birth, marriage, or adoption. This figure includes children living in group quarters, such as residential treatment facilities. For a small number of children, it could not be determined from the available data whether or not they were living with a parent. They are counted as not living with a parent. Rate is calculated using 1990 census data.

Source: Population Reference Bureau analysis of the U.S. Department of Commerce, Bureau of the Census, Census of Population and Housing 1990, Summary Tape File 3, Tables P-23, P-26, and P-41.

▲ Children aged 0-17 participating in Medicaid, 1997.

The estimated number of individual children aged birth through 17 eligible for Medicaid reimbursement during state fiscal year 1997. The data are reported by the child's county of residence at the time the eligibility was determined. Population data used in the denominator to calculate percents are 1995 estimates developed by the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Human Services, Bureau of Medical Services.

C3

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

Children aged 0-17 receiving Food Stamp benefits in August, 1997.

Total number of children aged birth through 17 who were receiving Food Stamp benefits in August, 1997. Percent is this number divided by the estimated number of children aged 0-17 in Maine developed by the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Human Services, Bureau of Family Independence.

Children aged 0-19 who are white, Asian/ Pacific Islander, American Indian, or African American, 1994 estimated.

Estimated numbers of children aged birth through 19 who fall into the major race groups recognized by the U. S. Census. Hispanic numbers are not included because they are also counted in the four major race groups. Population data used in the denominator to calculate percents is the 1994 estimate of population from the Census Bureau, which differs slightly from that developed by the Office of Data, Research, and Vital Statistics.

Source: U.S. Department of Commerce, Bureau of the Census, estimates of population by age, sex, and race/Hispanic origin.

Children aged 19 and under in motor vehicle crashes with personal injury, as a percent of all children in motor vehicle crashes, 1996.

All children aged birth through 19 injured in any type of motor vehicle accident, regardless of whether or not the youth was driving the vehicle, as a percent of all children in motor vehicle crashes during calendar year 1996.

Source: Maine Bureau of Highway Safety.

Children aged 5-17 who do not speak English at home, 1990.

The number of children aged 5 through 17 who spoke a language other than English at home as recorded in the 1990 U.S. Census. Children who spoke a language other than English at home are included in this category regardless of their proficiency in English or the primacy of English in the home. Rate is calculated using 1990 Census population data for all 5-17 year-olds.

Source: 1990 Census data as published in *The Challenge of Change: What the 1990 Census Tells Us About Children*, a report prepared by the Population Reference Bureau for the Center for the Study of Social Policy, September 1992, Table 34.

See also: Children with limited English proficiency attending school.

Children in single-parent families, three-year average, 1993-1995.

The estimated percent of related children aged birth through 17 who live in families headed by a male or female person without a spouse present in the home. Related children include the family head's children by birth, marriage or adoption, as well as other persons aged 0-17, such as nieces or nephews, who are related to the family head. Children aged 0-17 who do not live in a household where they are related to the head of the household are not included in this count. Rate is calculated using census population estimates.

Source: Population Reference Bureau analysis of data from the U.S. Department of Commerce, Bureau of the Census, Current Population Survey (March supplement), 1993 through 1995 as shown in the Annie E. Casey Foundation, *Kids Count Data Book: State Profiles of Child Well-Being*, 1997.

Children living in overcrowded housing, 1990.

The estimated percent of children living in households with more than one person per room. The definition of rooms includes living rooms, dining rooms, kitchens, bedrooms, finished recreation rooms, enclosed porches suitable for year-round use and lodgers rooms. Children living in households with nine or more rooms are assumed to live in housing that is not overcrowded, regardless of the number of people in the household. Rate is calculated using 1990 census population data.

Source: Center for Urban and Economic Research at the University of Louisville, analysis of U.S. Department of commerce, Bureau of the Census, Census of Population and Housing 1990, Five-Percent Public Use Microdata Sample.

Children under age 6 with both or only parent in the labor force, 1990.

Children under age 6 are included in this category if they live with only one parent and that parent is in the labor force (i.e., working or looking for work), or if they live with two parents and both are in the labor force. Parenthood is determined by birth, marriage or adoption. Rates are calculated using 1990 census population data.

Source: 1990 Census data as published in *The Challenge of Change: What the 1990 Census Tells Us About Children*, a report prepared by the Population Reference Bureau for the Center for the Study of Social Policy, September 1992, Tables 21 and 23.

Steve Demetriou

● New Indicator

Children under age 18 with both or only parent in the labor force, 1990.

Children under age 18 (including children under age 6) are included in this category if they live with only one parent and that parent is in the labor force (i.e., working or looking for work), or if they live with two parents and both are in the labor force. Parenthood is determined by birth, marriage or adoption. Rates are calculated using 1990 census population data.

Source: 1990 Census data as published in *The Challenge of Change: What the 1990 Census Tells Us About Children*, a report prepared by the Population Reference Bureau for the Center for the Study of Social Policy, September 1992, Tables 21 and 23.

Children with limited English proficiency attending school, 1995-1996 school year, rate per 1,000 students enrolled in public and private schools.

Children attending public or private school in Maine who are determined at the start of the school year to be limited in their ability to use English because it is not their native language.

Source: *Data Collection Report on Language Minority Children*, Maine Department of Education, Equity & Bilingual Education Projects, October 1996.

See also: Children aged 0-19 who are white, Asian/Pacific Islander, American Indian, or African American; Children aged 5-17 who do not speak English at home.

Children with special needs as reported to the Department of Education, 1996 -1997 school year; rate per 1,000 students enrolled in public and private schools.

The number of students enrolled in schools and individual education programs in Maine who are aged 3 through 21 and have disabilities requiring the provision of special education services. The count is taken as of December 1 of the school year.

Source: Maine Department of Education, Division of Special Services.

Children without health insurance, five-year average, 1992-1996.

The estimated percent of related children aged birth through 17 who are not covered by any kind of public or private health insurance, including Medicaid. Related children include a household head's children by birth, marriage or adoption, as well as any other person aged 0-17, such as nieces or nephews, who are related to the household head. Children aged 0-17 who do not live in a household where they are related to the head of the household are not included in this count. Figures shown here represent a five-year average of estimates from 1992 through 1996. Rates are calculated using census population estimates. Five-year averages are calculated to smooth out annual fluctuations due to small sample sizes.

Source: U.S. Department of Commerce, Bureau of the Census, Current Population Survey (March supplement), 1993 through 1997.

See also: Children aged 0-17 participating in Medicaid.

▲ Chlamydia cases, 10-19 year-olds, rate per 100,000 10-19 year-olds, 1996.

Reported cases of chlamydia among Maine children and adolescents aged 10 through 19 during calendar year 1996 as a percent of total 10-19 year-olds. Rate is calculated using 1995 population estimates developed by the Office of Data, Research, and Vital Statistics. Rates may not be comparable to those used in the 1997 Maine Kids Count Databook due to this change in denominator data.

Source: Maine Department of Human Services, Bureau of Health, HIV/STD Program.

See also: Gonorrhea cases, 10-19 year-olds, rate per 100,000 10-19 year-olds; Sexually active high school students who reported using a condom during last intercourse.

Mark McCall

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

Core mental health professionals, rate per 1,000 children aged 0-19, 1994.

Total number of psychiatrists, psychologists, licensed clinical social workers, marriage and family counselors, and psychiatric nurse specialists registered with the Maine Department of Professional and Financial Regulation. Data are all from 1994 with the exception of psychiatric nurse specialists, which are from 1993. This number does not indicate how many core mental health professionals provide services to children. Rate is calculated using 1994 population estimates developed by the Office of Data, Research, and Vital Statistics.

Source: Tabulation by Muskie School based on data from the Maine Department of Human Services, Office of Data, Research, and Vital Statistics, and the Department of Professional and Financial Regulation.

Crime

See: Arrests for crimes against persons of children aged 0-17; Arrests of children aged 0-17.

Domestic assaults reported to police, rate per 100,000 population, 1996.

Assaults reported to the police which were perpetrated by family or household members who are or were married or living together in a romantic relationship, natural parents of the same child (whether or not the couple ever lived together) or other adult family members related by blood or marriage. These are not unduplicated counts, and may include numerous assaults affecting the same individuals. These numbers also do not indicate the presence of minor children in households where the assaults occurred. Rates are calculated using 1995 population estimates developed by the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Public Safety, Uniform Crime Reports, 1996.

Drug abuse

See: Children aged 0-14 using services of licensed alcohol and drug abuse treatment providers; Students reporting marijuana use within past 30 days; Students reporting use of any form of cocaine within past 30 days; Students reporting use of inhalants at any time during their life; Youth aged 15-19 using services of licensed alcohol and drug abuse treatment providers.

Education

See: Adults aged 18 and over who have completed high school or equivalency; Children with limited English proficiency attending school; Children with special needs as reported to the Department of Education; High school completions; High school dropouts; High school graduates planning to attend post-secondary school; Home-schooled students; Private school enrollment; Public school enrollment.

Families headed by mothers receiving child support or alimony, five-year average, 1992 - 1996.

The estimated percent of families headed by a woman with no spouse present and with one or more own children aged birth through 17 receiving either child support or alimony payments during the previous calendar year. Includes those receiving partial payment as well as those receiving full payment. There may be no child support award in place for many of these families. Own children include the family heads children by birth, marriage or adoption. The figures shown here represent an average of data from 1992 through 1996. Rates are calculated using census population estimates.

Source: Population Reference Bureau analysis of data from the U.S. Department of Commerce, Bureau of the Census, Current Population Survey (March supplement), 1992 through 1996, as published in the Annie E. Casey Foundation, *Kids Count Data Book: State Profiles of Child Well-being*, 1997.

See also: Child support enforcement, cases with collection.

Brenda Hannah

General practice dentists, full-time equivalent rate per 1,000 children aged 0-19, 1994.

Full-time equivalent licensed dentists in active general practice as of May 15, 1994. One full-time equivalent equals 40 hours of work per week. This number does not indicate how many dentists provide services to children. Rate is calculated using 1994 population estimates developed by the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Human Services, Office of Data, Research, and Vital Statistics, Maine Cooperative Health Manpower Resource Inventory.

▲Gonorrhea cases, 10-19 year-olds, rates per 100,000 10-19 year-olds, 1996.

Reported cases of gonorrhea among Maine children and adolescents aged 10 through 19 during calendar year 1996 as a percent of total 10-19 year-olds. Rate is calculated using 1995 population estimates developed by the Office of Data, Research, and Vital Statistics. Rates may not be comparable to those used in the 1997 Maine Kids Count Data Book due to this change in denominator data.

Source: Maine Department of Human Services, Bureau of Health, HIV/STD Program.

See also: Chlamydia cases, 10-19 year-olds, rate per 100,000 10-19 year-olds; Sexually active high school students who reported using a condom during last intercourse.

Head Start Program, 1997.

Total number of children eligible for Head Start Programs statewide during 1997 state fiscal year. Head Start provides comprehensive child development and supportive services to low income preschool children and their families. Eligible children were estimated by multiplying the number of children under age five in each county by 40 percent to get an estimate of the number of 3-4 year-olds, then multiplying by the percent of children at or below the federal poverty line in that county. Current capacity reflects actual number of current slots available. Unmet need calculated by subtracting the number of slots from the estimate of eligible children.

Source: Maine Department of Human Services, Office of Child Care and Head Start.

Health insurance

See: Children without health insurance; Children aged 0-17 participating in Medicaid programs.

● New Indicator

Cathy Dowling

High school completions, as a percent of all 17 year-olds, 1995-1996.

Number of high school diplomas granted during the 1995-1996 school year, including persons completing General Equivalency Development (GED) Certificates or receiving diplomas granted through adult education centers. Rate is calculated using 1995 population estimates developed by the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Education, Division of Management Information.

See also: Adults aged 18 and over who have completed high school or equivalency.

High school graduates planning to attend post-secondary school, 1995-1996 school year.

High school graduates who intend to or are enrolled full or part time in post-secondary education, according to a survey administered by the local educational unit and submitted in the fall following graduation. Numbers include graduates from public high schools and those private high schools with at least 60% publicly-funded students. The rate is calculated as a percent of all students graduating, including regular diploma, other diploma, high school equivalency, or certificate of completion during the previous school year or subsequent summer school. The national rate reports the actual number of high school seniors who enrolled in any post-secondary education institution within two years of their scheduled graduation in 1992.

Source: Maine Department of Education, Division of Management Information; national rate from U.S. Department of Education, The Condition of Education 1997, Http:nces.ed.gov/pubs/ce/c9709a01.html

High school dropouts, 1995-1996 school year.

Any person who has withdrawn or been expelled from high school before graduation or completion of a program of studies and who has not enrolled in another educational institution or program. Each local educational unit submits a dropout report to the Department of Education as of the last day of school, counting all students who dropped out during the previous calendar year. Numbers include dropouts from public high schools and those private high schools with at least 60% publicly-funded students. The rate is calculated as a percent of all students enrolled in grades 9-12 during the school year.

Source: Maine Department of Education, Division of Management Information.

▲ High school students reporting alcohol use within past 30 days, 1997.

Percent of high school students responding to the spring 1997 Maine Youth Risk Behavior Survey who indicated that they had at least one drink of alcohol on one or more of the past 30 days. This information comes from a survey that used somewhat different questions than the one cited in the 1997 Maine Kids Count Databook, so comparisons must be made with caution.

Source: Maine Department of Education, Bureau of Instruction, *1997 Maine Youth Risk Behavior Survey Report.*

High school students reporting at least one suicide attempt in the last year, 1997.

Percent of high school students responding to the spring 1997 Maine Youth Risk Behavior Survey who indicated that they actually attempted suicide one or more times during the previous 12 months.

Source: Maine Department of Education, Bureau of Instruction, *1997 Maine Youth Risk Behavior Survey Report.*

▲ High school students reporting cigarette smoking within past 30 days, 1997.

Percent of high school students responding to the spring 1997 Maine Youth Risk Behavior Survey who indicated that they had smoked cigarettes on one or more of the past 30 days. This information comes from a survey that used somewhat different questions than the one cited in the 1997 Maine Kids Count Databook, so comparisons must be made with caution.

Source: Maine Department of Education, Bureau of Instruction, *1997 Maine Youth Risk Behavior Survey Report.*

▲ High school students reporting marijuana use within past 30 days, 1997.

Percent of high school students responding to the spring 1997 Maine Youth Risk Behavior Survey who indicated that they had used marijuana one or more times during the past 30 days. This information comes from a survey that used somewhat different questions than the one cited in the 1997 Maine Kids Count Databook, so comparisons must be made with caution.

Source: Maine Department of Education, Bureau of Instruction, *1997 Maine Youth Risk Behavior Survey Report.*

● High school students reporting use of any form of cocaine within past 30 days, 1997.

Percent of high school students responding to the spring 1997 Maine Youth Risk Behavior Survey who indicated that they had used any form of cocaine, including powder, crack, or freebase one or more times during the past 30 days.

Source: Maine Department of Education, Bureau of Instruction, *1997 Maine Youth Risk Behavior Survey Report.*

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

▲ High school students reporting use of inhalants at any time during their life, 1997.

Percent of high school students responding to the spring 1997 Maine Youth Risk Behavior Survey who indicated that they had sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paint or spray to get high during their life. This information comes from a survey that used somewhat different questions than the one cited in the 1997 Maine Kids Count Databook, so comparisons must be made with caution.

Source: Maine Department of Education, Bureau of Instruction, *1997 Maine Youth Risk Behavior Survey Report*

High school students who visited a health professional during the past 12 months, 1995.

Percent of high school students responding to the spring 1995 Maine Youth Risk Behavior Survey who indicated that they visited health professional one or more times during the previous 12 months. This question was not asked on the 1997 survey.

Source: Maine Department of Education, Bureau of Instruction, *1995 Maine Youth Risk Behavior Survey Report*

Olive Pierce

Home-schooled students, 1996 annual average.

The number of students approved for home schooling for the 1996 calendar year as reported to the Maine Department of Education by school superintendents.

Source: Maine Department of Education, Division of Management Information

Hospital discharges of children under 18 for mental health diagnoses, per 1,000 children aged 0-17, 1996.

The number of hospital discharges with mental health diagnoses of patients aged birth through 17 treated in specialty mental health units (DRG 800) or for childhood mental disorders (DRGs 424 through 432). These data count hospitalizations, not individual children. Rates are calculated using 1995 population estimates developed by the Office of Data, Research, and Vital Statistics.

Source: Maine Health Data Organization special data run.

Infant mortality; rate per 1,000 live births, five-year average, 1991-1995.

Deaths of infants under 1 year of age in comparison to live births occurring during the same time period. The data are reported by place of residence, not place of death. They are averaged over a five-year period (1991-1995) to smooth out annual fluctuations. Population data used in the denominators to calculate rates are based on birth records filed with the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Human Services, Office of Data, Research and Vital Statistics; 1995 national rate from Federal Interagency Forum on Child and Family Statistics, *America's Children: Key National Indicators of Well-Being, 1997.*

Jobs that pay a liveable wage, 1994.

The number of jobs in Maine that paid a liveable wage for a family of two (assuming a single wage-earner) as a percent of total jobs in calendar year 1994. A liveable wage is defined as 85% above the federal poverty line. In 1994, this amounted to $18,204 for a family of two.

Source: Maine Development Foundation.

Live births for which prenatal care began in the first trimester, 1995.

Number of live births occurring in calendar year 1995 for which the mother began receiving prenatal care during the first three months of pregnancy. Population data used in the denominators to calculate rates are based on birth records filed with the Office of Data, Research, and Vital Statistics. This indicator is often used as a measure of access to prenatal care, or to primary care in general.

Source: Maine Depart. of Human Services, Office of Data, Research, and Vital Statistics; 1995 national rate from Federal Interagency Forum on Child and Family Statistics, *America's Children: Key National Indicators of Well-Being, 1997.*

Low birthweight infants; live births under 2500 grams (5.5 pounds), as a percent of all live births, 1995.

Live births occurring in calendar year 1995 in which the newborn weighed less than 2500 grams, as a percent of total live births. Population data used in the denominators to calculate rates are based on birth records filed with the Office of Data, Research, and Vital Statistics.

Source: Maine Depart. of Human Services, Office of Data, Research and Vital Statistics; 1995 national rate from Federal Interagency Forum on Child and Family Statistics, *America's Children: Key National Indicators of Well-Being, 1997.*

● New Indicator

Mark S. McCall

Median income of families with children, 1994.

The estimated median annual income for families with related children aged birth through 17 living in the household. Related children include the family heads children by birth, marriage, or adoption, as well as other persons aged 0-17, such as nieces and nephews, who are related to the family head and living in the household. The median income is the dollar amount which divides the income distribution into two equal groups – half with income above the median and half with income below it. The figures shown represent an average of estimates from 1992 to 1996, based on surveys of a sample of Maine households. Although we refer to data collected in March 1994 as 1994 data, they actually reflect 1993 income. Therefore, figures are expressed in 1993 dollars. Rate is calculated using census population estimates.

Source: Population Reference Bureau analysis of the U.S. Department of commerce, Bureau of the Census, Current Population Survey (March supplement), 1992 through 1996, as published in the Annie E. Casey Foundation, *Kids Count Data Book: State Profiles of Child Well-being*, 1997.

See also: Children aged 0-17 living at or below federal poverty line.

Median household income, 1996.

The median household income is the dollar amount which falls in the middle of the range of household income distribution. Half of households have income above the median, the other half have income below it. This figure counts the income from all sources of the head of household and all other persons aged 15 and over in the household, whether related to the head of household or not. Figures are based on estimates from a survey of a sample of Maine households.

Source: U.S. Department of Commerce, Bureau of the Census, Current Population Reports, Series P60-188, *Income, Poverty, and Valuation of Noncash Benefits: 1996*, Table D.

Medicaid Early Periodic Screening, Diagnostic, and Treatment Services, eligible children under age 21 receiving at least one initial or periodic screening service, as a percent of those who should, 1996.

The number of eligible Medicaid recipients receiving at least one initial or periodic screening service offered through the Medicaid Programs Preventive Health Program (PHP) as a percent of the total number of Medicaid eligible children who should receive at least one initial or periodic screening service. These services include age-appropriate immunizations; lead screenings, monitoring and investigations; treatment for defects in hearing and vision; and dental care needed for the relief of pain and infections, restoration of teeth and maintenance of dental health.

Source: Maine Department of Human Services, Bureau of Medical Services, Form HCFA-416 (7-96): Annual EPSDT Participation Report.

OUI arrests for drivers under age 21, rate per 1,000 licensed drivers under age 21, 1996.

Arrests of Maine drivers under age 21 for Operating Under the Influence (driving with a blood alcohol concentration of .08 percent by weight). OUI includes being under the influence of alcohol, a drug or drugs other than alcohol, or any combination of alcohol and one or more drugs other than alcohol. The blood alcohol concentration is measured as a percent by weight of alcohol in the blood.

Source: Maine Bureau of Highway Safety.

See also: Alcohol-related license suspensions for drivers under age 21.

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

▲ Pediatricians, family practitioners, and general practitioners (MDs and DOs); full-time equivalent rate per 1,000 children aged 0-19, 1995.

Full-time equivalent licensed pediatricians, family practitioners, and general practitioners (allopaths and osteopaths) registered with the Maine Department of Professional and Financial Regulation in 1995. One full-time equivalent equals 40 hours of work per week. This number does not indicate how many family practitioners and general practitioners provide services to children. Rates are calculated using 1995 population estimates developed by the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Human Services, Office of Data, Research, and Vital Statistics, Maine Cooperative Health Manpower Resource Inventory.

Private school enrollment, October 1996.

Maine students enrolled in private schools as of October 1, as reported by the local educational unit. These numbers include publicly-funded students enrolled in private schools.

Source: Maine Department of Education, Division of Management Information.

Public school enrollment, October 1996.

Maine students enrolled in public schools as of October 1, as reported by the local educational unit.

Source: Maine Department of Education, Division of Management Information.

Recipients of WIC benefits, 1996.

Number of individuals receiving WIC benefits during calendar year 1996. WIC (Women's, Infants' and Children's Supplemental Nutrition Program) provides specific nutritious foods and nutrition education to low income pregnant and breast feeding women, infants and children up to the age of five. Recipients must be at or below 185% of federal poverty guidelines and be at medical or nutritional risk. Rate is calculated using 1995 population estimates developed by the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Human Services, WIC Program, special data run.

Repeat teen pregnancies as a percent of total teen pregnancies, 1995.

The percent of females under age 20 who became pregnant during calendar year 1995 who had already been pregnant at least once before in their lives.

Source: Special tabulations by Maine Department of Human Services, Office of Data, Research, and Vital Statistics.

> *"Society looks at all of us as a bunch of loser dropouts. That's so wrong, cause we're taking responsibility for our actions and we don't have to be here. So in my eyes we're the strongest bunch of kids for the stuff we're dealing with past, present and future."*
>
> Jess
> *The Community School, Camden*

Requests for child abuse and neglect services, 1996.

Any written or verbal requests made during calendar year 1996 for Child Protective Services intervention in a family situation on behalf of a child in order to assess or resolve problems being presented. Cases are screened out when evidence of serious family problems or dysfunction was evident but the situation did not contain an allegation of abuse or neglect. Cases deemed appropriate for referral meet the standards contained in 22 MRSA, 4002 as defined under the definition for substantiated child abuse and neglect victims. Appropriate referrals not assigned due to lack of resources refers to the Department of Human Services ability to respond to referrals of child abuse and neglect based on factors such as the number of caseworkers, the seriousness or complexity of cases receiving services and the availability of resources. Current staff resources are not sufficient for the Department to assign all of the referrals it receives for Child Protective Services. The allegations of these referrals warrant Child Protective Services intervention but are not assigned because the office has reached the upper limits of its capacity to investigate and assess.

Source: Maine Department of Human Services, Bureau of Child and Family Services, Child Protective Services.

See also: Substantiated child abuse and neglect victims, rate per 1,000 children aged 0-17.

School children receiving subsidized school lunches, 1996-1997 school year.

The National School Lunch Program is a meal entitlement plan primarily funded through federal dollars. All elementary and junior high schools are required to participate in the program. In Maine, high schools have the option of participating. Children are eligible for free school lunches if their family income does not exceed 130% of poverty level. They are eligible for reduced price school lunches if their family income falls between 130% and 185% of poverty level. Student eligibility for the program is a measure of change in the poverty status of children. Rates are calculated as a percent of total school enrollees.

Source: Maine Department of Education, School Nutrition Program.

Sexually active high school students who reported using a condom during last intercourse, 1997.

Percent of high school students responding to the spring 1997 Maine Youth Risk Behavior Survey who indicated that they were sexually active and who said they used a condom during their most recent intercourse.

Source: Maine Department of Education, Bureau of Instruction, *1997 Maine Youth Risk Behavior Survey Report*.

See also: Chlamydia cases, 10-19 year-olds, rate per 100,000 10-19 year-olds; Gonorrhea cases, 10-19 year-olds, rate per 100,000 10-19 year-olds.

State AFDC and Food Stamp benefits as a percent of poverty line in 1996.

The percent of the prior years U.S. poverty threshold for a one-parent family of three persons covered by the combination of current-year state AFDC (Aid to Families with Dependent Children) and Food Stamp benefits. For such a family, the poverty threshold in 1996 was $12,641.

Source: Data are provided by the Congressional Research Service, Education and Public Welfare Division, Library of Congress, as shown in the Children's Defense Fund, *The State of America's Children Yearbook 1997*.

See also: Adolescent female heads of households on AFDC; Children aged 0-17 on AFDC; Children aged 0-17 on AFDC, mean monthly number in calendar 1996.

● New Indicator

Substantiated child abuse and neglect victims; rate per 1,000 children aged 0-17, 1996.

The number of individual victims of child abuse and neglect in calendar year 1996 for whom assessment led to a finding of a threat to a child's health or welfare by physical, mental or emotional injury or impairment, sexual abuse or exploitation, deprivation of essential needs or lack of protection from these by a person responsible for the child (22 M.R.S.A. 4002).

These numbers are affected by the Department of Human Services' ability to respond to referrals of child abuse or neglect based on factors such as the number of caseworkers, the seriousness or complexity of the cases receiving services, and the availability of resources. Current staff resources are not sufficient for the Department to assign all of the referrals it receives.

Source: Maine Department of Human Services, Bureau of Child and Family Services, Child Protective Services; 1995 national rate from U.S. Department of Health and Human Services. *Child Maltreatment 1995: Reports From the States to the National Child Abuse and Neglect Data System.*

Suicide

See: Child and teen suicides.

Teen deaths; rate per 100,000 children aged 1519, five-year average, 1991-1995.

The number of deaths from all causes to children aged 15 through 19. The data are reported by the childs place of residence, not the place of death. They are averaged over a five-year period (1991-1995) to smooth out annual fluctuations. Population data used in the denominators to calculate the rates are based on estimates developed by the Office of Data, Research, and Vital Statistics. Rates are calculated per 100,000 at the state level to be consistent with standard mortality data reporting practices, per 10,000 at the county level for ease in interpreting relatively rare occurrences and small base populations.

Source: Special tabulations by the Maine Department of Human Services, Office of Data, Research and Vital Statistics; 1994 national data published in Federal Interagency Forum on Child and Family Statistics, America's Children: Key National Indicators of Well-Being, 1997.

Teen pregnancy, rate per 1,000 females aged 10-17, 1995.

All reported live births, induced abortions, and fetal deaths occurring to females aged 10 through 17 during calendar year 1995. The rate is calculated using a denominator of the 1995 population of 10-17 year-old females estimated by the Office of Data, Research, and Vital Statistics.

Source: Maine Department of Human Services, Office of Data, Research and Vital Statistics.

Teens aged 16-19 not in school and not in the labor force, three-year average, 1993-1995.

Estimated percent of all teens aged 16 through 19 who are not enrolled in school full or part time, and not employed full or part time. Three-year averages are used to reduce fluctuations due to sampling error.

Source: Special tabulations of Current Population Survey microdata prepared by the Bureau of Labor Statistics, as published in the Annie E. Casey Foundation, *Kids Count Data Book: State Profiles of Child Well-being*, 1997.

Teens aged 16-19 not in school and not high school graduates, three-year average, 1993 - 1995.

A reflection of educational performance, this measure is based on the twelve-months Current Population Survey (CPS) file maintained by the Bureau of Labor Statistics (BLS). Each month the CPS asks respondents in about 60,000 households nationwide about their activities related to the labor force and education. For this indicator, a percentage is calculated based on nine months of data (September through May) for each year. Three-year averages were used to reduce fluctuation due to sampling error.

Source: Special tabulations of Current Population Survey microdata prepared by the Bureau of Labor Statistics, as published in the Annie E. Casey Foundation, *Kids Count Data Book: State Profiles of Child Well-being*, 1997.

Teens aged 19 and under receiving services from family planning providers, 1997.

Unduplicated client counts of Maine teens, male and female, aged 15 through 19, who received services at family planning clinics during the 1997 state fiscal year. Such services include annual exams; contraceptive counseling and administration; breast and pelvic exams; pap smears; pregnancy testing; STD testing and treatment; and treatment of infections.

Source: Family Planning Association of Maine, Ahlers Reporting System, fiscal year 1997, page 4, Table FL-3A, Unduplicated Client Counts by Age, CVR Item #21.

Vicky Bissett

▲ This indicator has changed from that used in last year's Data Book. Please see each indicator's definition for the exact changes.

Teen violent deaths; rate per 100,000 children aged 15-19, 1991-1995.

Deaths caused by homicide, suicide, and accidents to children aged 15 through 19. The data are reported by the child's place of residence, not the place where the death occurred. Population data used in the denominators to calculate the rates are based estimates developed by the Office of Data, Research, and Vital Statistics. Rates are calculated per 100,000 at the state level to be consistent with standard mortality data reporting practices, per 10,000 at the county level for ease in interpreting relatively rare occurrences and small base populations.

Source: Special tabulations, Maine Department of Human Services, Office of Data, Research, and Vital Statistics; 1994 national rate from Annie E. Casey Foundation, *Kids Count Data Book: State Profiles of Child Well-being*, 1997.

Total population, 1995 estimated.

Total number of individuals by age are estimated by extrapolating from the 1990 census, taking into account births, deaths, and net migration.

Source: Estimates prepared by the Maine Department of Human Services, Office of Data, Research, and Vital Statistics.

Two-year-olds who were age-appropriately immunized, 1996.

Immunization rates are estimated from retrospective surveys of five-year-olds entering a representative sample of Maine schools each year. According to current state recommendations, two-year-olds should have had 4 DPT (diphtheria, tetanus, pertussis) vaccines, 3 OPVs (oral polio vaccines), and 1 MMR (measles, mumps, rubella) vaccine. For a child to receive these immunizations, a minimum of 4 well-child visits to a health care professional is necessary.

Source: Maine Department of Human Services, Immunization Program; 1995 national data published in Federal Interagency Forum on Child and Family Statistics, *America's Children: Key National Indicators of Well-Being*, 1997.

Unemployed persons aged 16 and over, annual average, 1996.

The sum of the number of unemployed people aged 16 and over each month of the year 1996, divided by 12. Percent is the average number of unemployed people divided by the average number of people in the civilian labor force. Data are not seasonally adjusted.

Source: Maine Department of Labor, Division of Economic Analysis and Research, in cooperation with the U.S. Bureau of Labor Statistics.

Taking a Stand

"...I have learned how to say not to drug offers and to avoid violence ...I am going to stay drug free forever! That way I will be able to live longer, and I won't get diseases that are caused by drugs. Another reason I am going to stay drug free is because I want to graduate from college and get a good job. If I took drugs, I probably would not get a good job because I would most likely be undependable and have a bad attitude...One way you can stay drug free is by not even trying any kind of drug. Sometimes when a person tries drugs they start to do them more and more until they get hooked on them...there are many different ways to say no...I hope I never get offered drugs in my entire life..."

Caitlyn Sperrey, Belgrade

Unemployed persons aged 16-19, annual average, 1994.

The estimated average percent of Maine 16 through 19 year-olds in the civilian labor force but not employed during calendar year 1994. This includes 16 through 19 year-olds still enrolled in school who also consider themselves to be in the labor force.

Source: U.S. Bureau of the Census, Current Population Survey.

Well child clinic visits by children under age 21, 1996.

Total number of well child clinic visits provided statewide to children under age 21 by public health nurses or agencies contracted by the Division of Community and Family Health during the 1996 state fiscal year. Data is based on visits, not individuals, so children who had more than one visit in the year are counted multiple times. A visit, however, may include more than one type of service, e.g. screening for lead poisoning and immunization. Services provided during well child visits may also include periodic preventive and diagnostic exams, hearing and vision screening, referral counseling, and some sick care.

Source: Maine Department of Human Services, Bureau of Health, Division of Community and Family Health.

Women in labor force with youngest child under age 6, 1990.

The number of women aged 16 and over (regardless of marital status) whose youngest child is under age 6, and who are in the paid labor force. Rates are calculated as a percent of all women aged 16 and over whose youngest child is under age 6, using census population data. These figures are corrected from those shown in earlier editions of the Maine Kids Count Databook.

Source: 1990 Census data as published on the Census Bureau website (http://venus.census.gov/cdrom/lookup).

Women in labor force with youngest child ages 6 to 17, 1990.

The number of women aged 16 and over (regardless of marital status) whose youngest child is between ages 6 and 17, and who are in the paid labor force. Rates are calculated as a percent of all women aged 16 and over whose youngest child is between the ages of 6 and 17. These figures are corrected from those shown in earlier editions of the Maine Kids Count Databook.

Source: 1990 Census data as published on the Census Bureau website (http://venus.census.gov/cdrom/lookup).

Youth aged 15-19 using services of licensed alcohol and drug abuse treatment providers; rate per 1,000 youth aged 15-19, 1996.

The number of individual youth aged 15 through 19 using services provided by Maine alcohol and drug abuse treatment facilities with state funding, Driver Education Evaluation Program certification, or certification to dispense methadone, during calendar year 1996. Population data used in the denominator to calculate rates are 1995 estimates developed by Office of Data, Research, and Vital Statistics.

Source: Maine Addiction Treatment System, Maine Department of Mental Health, Mental Retardation, and Substance Abuse Services.

See also: Alcohol-related license suspensions for drivers under age 21; Children aged 0-14 using services of licensed alcohol and drug abuse treatment providers; OUI arrests for drivers under age 21; High school students reporting alcohol use within past 30 days; High school students reporting use of inhalants at any time during their life; High school students reporting marijuana use within past 30 days; High school students reporting use of any form of cocaine within past 30 days.

● New Indicator

Index

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The purpose of the annual Maine KIDS COUNT Data Book is to provide policymakers and citizens with the best available data on Maine's children. To help us provide useful information, we need to know who uses the Maine KIDS COUNT Data Book and for what purposes. Please help us by checking the appropriate spaces below and returning this sheet. We welcome your comments and suggestions.

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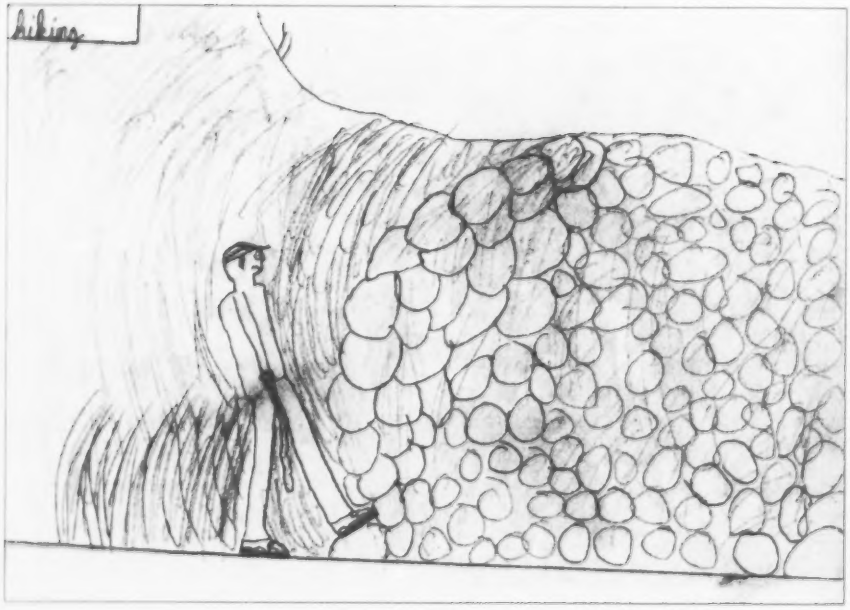

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